

*Public Health
Act 26/7/55 18*



CITY AND COUNTY OF NORWICH

Annual Report

OF

THE MEDICAL OFFICER OF HEALTH

AND

THE PRINCIPAL

SCHOOL MEDICAL OFFICER

(Dr. R. C. M. Pearson)

AND

THE SENIOR SANITARY INSPECTOR

(Mr. G. D. Kirby)

FOR THE YEAR

1955



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CONTENTS.

	<i>Page.</i>
Statistics, etc.	13—18, 154—172
Prevalence and Control of Infectious Diseases	19—39
National Health Service Act, 1946	41—74
National Assistance Acts and Children Act, 1948	75—80
Sanitary Circumstances in the Area	81—110
School Health Service	111—172
<hr style="width: 50%; margin: 10px auto;"/>	
Accommodation for Mental Defectives	42, 73, 74
Ambulance Service	54, 60—63
Ante-Natal Clinics	43—45, 55
Bakehouses	110
B.C.G. Inoculation	142—144
Blind Persons	77—79, 146, 150
Blood Testing	44, 45
Booking Arrangements—Midwifery Service	43, 54
Butchers' Shops	110
Canal Boats	94
Cardiac Clinic	117, 129, 130
Care of Mothers and Children	43—54
Care of Premature Infants	52, 53
Care of Unmarried Mothers	45, 46
Certified Day Special School	147—149
Cesspools	84, 86
Chest X-Ray of Mothers	45
Child Guidance	139
Children Act, 1948	80
Collection and Disposal of Refuse	84, 86—88
Common Lodging Houses	89
Consultant Facilities	53, 54, 56, 57
Contraceptive Clinic	57
Co-operation of Parents, etc.	145
Dairies	110
Deaf and Dumb Pupils	146
Defective Hearing	137, 138
Dental Treatment	51, 52, 125—127
Diabetes	147
Diphtheria Immunisation	60
Discharging Ears	128
District Clinics	123, 124
Domestic Helps	69, 70
Drainage and Sewerage	82, 83
Drains—House	90
Drayton Hall Maternity Home	42, 56
Educationally Sub-normal Pupils	147, 148
Entertainment Troupes—Medical Examination	153
Epileptics	76, 147
Eradication of Bed Bugs	97
Extra Nourishment—Mothers and Children	50, 51
Factories Acts	91, 92
Fish Shops	110
Food—Chemical Examination of	105—108
Food Hygiene	153

	<i>Page.</i>
Handicapped Pupils	145—150
Health Education	69
Health of Children	117, 118
Health Visitors	57, 58
Hellesdon Hospital	42
Home Advisers	67, 68
Home Nursing Service	58, 59
Hospitals	42
Hospital Treatment—School Children	118
Housing	94—97
Housing Repairs and Rents Act, 1954	83, 97
Ice-Cream	108, 109
Infant Welfare Centres	48—50
Infectious Diseases	25—38, 139—144
Inspection and Supervision of Food	97—110
Isolation Hospital	42, 55
Jenny Lind Hospital	42
Juvenile Delinquency	152
Kitchen Waste and Salvage	85—88
Laboratory Work	39
Maladjusted Pupils	147
Maternal Mortality	56
Meals for School Children	144, 145
Meat Inspection and Meat Marking	84
Meat and other Foods	98—110
Medical Equipment—Loan of	68, 69
Medical Inspection of School Children	118—122
Meetings of Owners and Tradesmen	89
Mental Deficiency Acts	73, 74
Mental Health Services	70—74
Midwifery Services	54—57
Midwives	54
Milk—Distribution of	50, 51
Do. Supply and Examination of	97, 98
Minor Ailments Clinics	122—124
Mothercraft Teaching	46
Music Halls	90
National Assistance Acts, 1948-1951	75—80
National Health Service Act, 1946—Administration, etc.	41—74, 117
Norfolk & Norwich Hospital	42, 55
Nuisances	89
Nurseries and Child Minders Regulation Act, 1948	53
Nursery Provision	53
Nursery School and Classes	150, 151
Nursing Homes	57
Nursing Mothers—Extra Nourishment	50, 51
Nutrition of Children	152
Occupation Centre	74
Offensive Trades	89
Orthopædic Treatment	53, 117, 130, 132, 133
Otorrhoea—Treatment of	128
Outworkers	92

	<i>Page.</i>
Pet Animals Act, 1951	93
Pig Food	85, 86, 87
Piggeries	90
Post-Natal Clinics	44
Premature Infants—Care of	52, 53
Preserved Meat Manufacturers	109
Prevention of Illness, Care and After-Care	63—69
Pupil Midwives	54
 Rag Flock, and Other Filling Materials Act, 1951 ...	 92
Rats and Mice—Destruction	90, 91
Refresher Courses	54, 58, 59
Refuse—Collection and Disposal of	84—88
Relaxation Classes	46
Remand Home	152
Restaurants, Cafes, etc.	109
Rheumatism—Acute	130
Ringworm	54, 130, 131
 Salvage	 85, 86
Sanitary Inspection of the Area	89
School Clinics	117, 122—124
Sewerage and Drainage	82, 83
Shops and Offices	92, 93
Sick Room Equipment	68, 69
Slaughter Houses... ..	84
Spastics	76
Speech Therapy	53, 54, 136, 137
Staff	11, 12, 117
Statistics	14—18, 154—172
Sterilised Maternity Outfits	46
Still-births	56
Swimming Baths	93, 94
 Teachers—Medical Examination of	 153
Tents, Vans and Sheds	90
Theatres	90
Tonsillectomy	129
Tuberculosis	20—24, 63—67, 142—144
 Uncleanliness	 134, 135
Unmarried Mothers—Care of	45, 46
Unsatisfactory Households	67, 68
Unsound Food	98—105
 Vaccination	 59
Vale Hospital, Swainsthorpe	72
Venereal Diseases	39
Vision—Defective	53, 128
 Water Supply	 82
Welfare Foods	50, 51, 152, 153
Welfare of Old People	76
West Norwich Hospital	42, 55
Whitlingham Hospital	42
Whooping Cough Inoculation	60

Health Committee

Lord Mayor :

COUNCILLOR IAN D. DICKSON, M.C., M.D.

Chairman :

ALDERMAN J. BROOKSBANK, J.P. (until 4.2.1955).

COUNCILLOR A. SOUTH, J.P. (from 22.2.1955).

Vice-Chairman :

COUNCILLOR R. P. BRAUND (until 24.5.1955).

COUNCILLOR IAN D. DICKSON, M.C., M.D. (Lord Mayor)
(from 24.5.1955).

Members :

Ald. R. P. BRAUND

Coun. MRS. RUTH E. HARDY

Coun. H. ALLEN, J.P.

„ G. HOWARD

„ MRS. B. C. DAVIES

„ MRS. J. M. KEEFE

„ L. E. GOODMAN

„ E. PRITCHARD

„ MRS. E. M. GOSLING

Co-opted Members :

DR. T. D. F. MONEY

DR. R. H. SCOTT

Representatives of the Norwich

Local Medical Committee.

MR. P. JOHNSON, L.D.S., R.C.S.

*Representative of the Norwich
Executive Council.*

PUBLIC HEALTH DEPARTMENT,
CHURCHMAN HOUSE,
68, ST. GILES' STREET,
NORWICH.
5th July, 1956.

MY LORD MAYOR, LADIES AND GENTLEMEN,

I have pleasure in presenting my Annual Report for the year 1955, and would like to draw your attention to certain matters contained therein.

THE CHANGING SCENE.

No spectacular advance has been made during the year but a number of additional links have been forged between the various branches of the Health Service. Every effort has been made to bring the practical work of the Local Health Authority Service and the General Practitioners closer together, notably through the X-ray Department at the Chest Clinic and in a consultative capacity, with the Consultants and the General Practitioners, to discuss the Midwifery Services. In addition the Medical Officers have been able to attend Ante-natal Clinics at the Hospital. A report was made to the Local Medical Committee and the Local Executive Council on the findings of the survey of the relationship between the General Practitioner and Local Health Authority Services as a result of which a booklet was prepared giving particulars of all the Local Health Authority and Voluntary Services in the city. On the pædiatric side Medical Officers and Health Visitors have had an opportunity either individually or in small groups of attending the Jenny Lind Hospital and from time to time a Consultant Psychiatrist and a Psychiatric Social Worker have visited Infant Welfare Centres. Preliminary arrangements were made in conjunction with the staff of Little Plumstead Hospital for an investigation into the rate of development of normal children.

In association with the County Medical Officer it has been possible to hold meetings at the Norfolk and Norwich Hospital to discuss Refresher Courses for Midwives and the better administration of the Ambulance Service. Opportunity was taken to link up with the Consultant Radiotherapist to discuss steps which might be taken to improve the knowledge of preventive work in Cancer education. For this purpose District Nurses and Health Visitors visited the Radiotherapy Department, arrangements were made with the Medical Society for symposia on cancer of various sites, a lecture was given to District Nurses and Health Visitors on the general aspects of cancer education and it was left to the Consultant Radiotherapist to make minor administrative arrangements within the Hospital Service.

One of the most important aspects of the year's work has been the link up with the Friends of Kelling who are now prepared to provide after-care for patients discharged from Sanatoria and later hope to improve the rehabilitation prospects of adults recovering from tuberculosis. The monthly meeting at the Chest Clinic of all concerned with the care of tuberculous patients has proved most fruitful and the details given in the Report about the progress of housing tuberculous patients is most encouraging. Incidentally, in the Annual Report of the School Health Service, details are given of the care taken to investigate all cases of tuberculosis amongst school children and the arrangements made for B.C.G. inoculations of fourteen-year-old children.

ACCIDENTS IN THE HOME.

The Home Safety Committee has viewed very seriously the number of accidents to small children which take place at home. The Heating Appliances (Fireguard) Act applies only to new electric fires, gas stoves, etc., but there are still many older types of heating appliances already fitted in homes which have either no guard or an inadequate one. This is the commonest cause of burning accidents. Whilst the search goes on for a non-inflammable type of material, particularly for children's garments, every mother should know that certain materials are highly inflammable and must at all costs be kept away from the chance of catching fire. Overcrowded homes make it difficult if fireguards are not firmly fixed and there is also a greater risk of scalding in such households. Whilst stress is laid upon what should be essential in private houses, attention should be drawn to the fact that fires in public rooms in hotels, restaurants, waiting rooms, etc., are not always adequately guarded. The information supplied by the Jenny Lind Hospital is most valuable to the Home Safety Committee, and so too are the posters provided for Infant Welfare Centre purposes, but it is the visit of the individual Health Visitor to whom the mother looks for advice which is most effective in bringing about and continuing to impress upon all parents the necessity of safety at home. What has been said so far applies largely to young children, but it is equally important in the case of old people living alone. The tragedy of deaths from burns and scalds and the suffering, disfigurement and disabilities of those who survive have failed to impress the public of the necessity to give thought throughout each and every day to prevention of accidents in the home.

STATISTICS.

On the statistical side, the birth rate continued to fall, no maternal deaths were recorded, and an unusually low level of both infant mortality and neonatal mortality should draw attention to

the continued improvement in the care of child life in its early stages. The fall in infant deaths was largely due to a smaller number of children dying from bronchitis and broncho-pneumonia, fewer congenital defects and the fact that the premature birth rate fell from 10% to 6.3% (with therefore less risk to infant life).

On the Tuberculosis side the death rate was not quite so satisfactory and there was only a slight rise in the notification rate.

Once again an epidemic of Dysentery and the continuing cases of Food Poisoning gave considerable work to the services deployed against them. A detailed account is given of the care taken to prevent further spread from each infected family and the investigations carried out to encircle the two typhoid fever cases.

VACCINATION AND IMMUNISATION.

It is a pleasure to report a very steady improvement during the last five years in the percentage of children under one year who have been vaccinated against smallpox (it is now almost one third of those born). There has also been a very marked improvement in the number of children immunised against diphtheria, with a somewhat smaller but still significant rise in those receiving inoculations against whooping cough.

HEALTH EDUCATION.

In the summer a civic exhibition attracted considerable attention not only to the stands depicting the work of the department but also due to the opportunity of an X-ray by the Mass Miniature Radiography Unit. It is a pity that such exhibitions cannot be continually available for educational purposes amongst young adolescents.

SANITARY SERVICES.

The year has not been without significance on the sanitary side of the department's work as will be seen from the Senior Sanitary Inspector's report which, being largely statistical cannot give sufficient weight to the value of the routine work done in slaughterhouses, in the surveying of unfit houses and the sampling of the swimming baths, nor does it record the infinite amount of detailed attention given to the prevention of the spread of dysentery and food poisoning infection. Little of this work comes to the notice of the public but it is nevertheless absolutely essential.

So far insufficient general attention has been given by some members of the public to the dumping of waste material on open ground which makes it unsafe to children playing there and could easily cause a public health nuisance.

MATERNAL AND CHILD CARE.

With the falling birth rate it is natural to record a smaller number of attendances by mothers at Ante-natal and Post-natal Clinics, but it should be possible to improve upon the attendance of Ante-natal mothers at the Chest Clinic for X-ray purposes. Efforts have been made to expand teaching arrangements for Mothercraft and Relaxation exercises to hospital patients both centrally and at the peripheral clinics, so far with only limited success.

Whilst the number of mothers actually confined at home continues to fall, a greater number each year book a General Practitioner Obstetrician for their confinement, and possibly for both these reasons a smaller number of visits have been made by midwives for ante-natal and nursing purposes. Also a smaller number of mothers have had to be discharged from hospital on about the tenth day of the puerperium.

During the year the Health Committee gave careful consideration to the report of the Social Worker in charge of the Hostel for Unmarried Mothers which is set out in detail for information purposes.

The birth rate has been falling for a number of years, a fact which has a bearing on the reduced number of visits by Health Visitors, but this is also influenced by the wider scope of their work and in-service training, visits to hospital and elsewhere, which have been a feature of the year's work. Careful thought has been given to the attendance of children at Infant Welfare Centres and the advice to be given to the mothers, which must not only be of a confidential nature but detailed throughout.

THE CHANGING PATTERN OF DISTRICT NURSING.

Particular emphasis has been paid in this report on the work of the District Nursing Service and the provision of a Bathing Attendant, Night Nurses and Night Sitters, all of whom form part of the team serving those who require attention in their own homes.

A large proportion of the work of the District Nurses is now devoted to the care of old persons with long and chronic illnesses. Furthermore, slightly less than one-third of all cases visited required an injection.

A closer link with the Hospital Service permits the early discharge of patients. It is important that the Nursing and Almonering as well as the Medical staff of hospitals should know just what facilities are available for Home Nursing.

HELP AT HOME.

The Home Help Service continued its expansion not only in providing help for old people but, as will be seen from the appropriate section, by giving service to families deprived of maternal

care and taking on a preventive outlook amongst old people living alone, it has rendered sound social service.

The Unsatisfactory Households Committee have had an active year in giving consideration to those families returning to the city from Rackheath and Hethel Camps, whilst continuing the supervision of the families already under its care.

MENTAL HEALTH.

A new development at the Occupation Centre was the provision of a nursery class for young severely mentally handicapped children on the waiting list for admission to institutional care, which not only gave relief to sorely pressed parents, but also helped with the training of these children.

AMBULANCE SERVICE.

Whilst paying a tribute to the work of the Ambulance Service it will be noted that the slight fall in journeys recorded last year has not been maintained, but the rise is only slight. The decision to instal telecommunications is to be welcomed and should save considerable mileage, possibly also vehicles and staff.

CONCLUSION.

It is difficult to appreciate how quickly and fundamentally the Service is changing. So many people are interested in health that the links forged between the various services must be sound and lasting because staff changes take place and younger members take time to assimilate the history and tradition which lies behind a sound service.

It is my pleasure to record the loyal support I have received from all the staff of the department, the helpful suggestions made by my Deputy, the willing co-operation of my Senior Sanitary Inspector in his field, and the administrative ability of my Senior Administrative Assistant. All these have lightened my responsibility and permitted more time to be given to the expansion of the Service.

Finally my thanks are due to the Chairman and Members of the Health Committee for their ready acceptance of many of my suggestions.

I have the honour to be,

My Lord Mayor, Ladies and Gentlemen,

Your obedient Servant,

R. C. M. PEARSON,

Medical Officer of Health.

STAFF OF THE PUBLIC HEALTH AND SCHOOL HEALTH SERVICES, 1955.

MEDICAL OFFICERS.

R. C. M. PEARSON, M.D., Ch.B. (Ed.), M.R.C.P. (Ed.), D.P.H.

Medical Officer of Health and Principal School Medical Officer.

E. H. GORDON, M.D., B.Ch., B.A.O., D.P.H.

Deputy Medical Officer of Health and Deputy School Medical Officer.

G. W. RIDDEL, M.C., M.B., Ch.B. (Aber.), D.P.H.

Medical Officer in charge of School Health Service; and
Assistant Medical Officer of Health.

MISS A. A. NICOL, M.B., Ch.B. (Aber.), D.P.H.

Senior Assistant Medical Officer of Health for Maternity and Child Welfare.

MRS. M. E. ANDERSON, M.B., Ch.B. (St. Andrews), M.R.C.O.G. (Lond.).

Assistant Medical Officer of Health; and School Medical Officer.

C. H. B. LAWFIELD, M.A., M.R.C.S. (Eng.), L.R.C.P. (Lond.).

Assistant Medical Officer of Health; and School Medical Officer.

MEDICAL OFFICERS (PART-TIME).

*P. H. SUTTON, B.Sc. (Lond.), M.D., B.S. (Lond.), M.R.C.S. (Eng.),
M.R.C.P. (Lond.).

(Chest Physician)

E. LISTER, M.D. (Vienna).

(For treatment of Scabies.)

*In the service of the Regional Hospital Board.

PUBLIC ANALYST (PART-TIME).

ERIC C. WOOD, Ph.D., A.R.C.S., F.R.I.C.

NURSING STAFF, ETC.

MISS E. M. STANWORTH, Non-Medical Supervisor of Midwives and 15
Domiciliary Midwives.

MISS G. J. BOOKER, Resident Assistant Non-Medical Supervisor of Mid-
wives. (Until 13th September, 1955.)

MISS V. WATSON, Resident Assistant Non-Medical Supervisor of Mid-
wives. (From 1st November, 1955.)

MISS S. M. PECKHAM, Superintendent of the Home Nursing Service and 17
District Nurses.

16 Health Visitors and School Nurses.

2 Tuberculosis Health Visitors.

1 School Nurse.

1 Welfare Officer (Part-time) Chest Clinic.

1 Nursing Attendant.

DENTAL OFFICERS.

- A. E. SUMMERS, L.D.S. (Glasgow), Principal School Dental Officer.
J. D. POLLARD, L.D.S. (Eng.), School Dental Officer.
A. M. WILSON, L.D.S. (Edin.), School Dental Officer.
MRS. M. WILSON, L.D.S. (Edin.), School Dental Officer.
MISS J. K. FIFE, L.D.S.(Glasgow), School Dental Officer.
(From 14th February, 1955, to 26th August, 1955.)
J. M. MITCHELL, L.D.S., R.C.S.(Edin.), School Dental Officer.
(From 2nd May, 1955.)
C. A. PITT STEELE, L.D.S., R.C.S.(Eng.), School Dental Officer.
(From 3rd October, 1955.)
6 Clerk Attendants.

SANITARY INSPECTORS.

- G. D. KIRBY, F.R.S.I., M.Inst.P.C., F.S.I.A., Senior Sanitary Inspector.
J. H. SMELLIE, M.R.S.I., M.S.I.A., Deputy Senior Sanitary Inspector.
13 Inspectors, all holding the Certificate of the Royal Sanitary Institute for Sanitary Inspectors and the Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods. (One vacancy.)
3 Cleansing Inspectors and 1 Disinfecting and Drainage Officer.

WEIGHTS AND MEASURES STAFF.

- E. E. SCOTT, M.I.W.M.A., Senior Inspector.
2 Inspectors.
2 Unqualified Assistants.

SPEECH THERAPIST (PART-TIME.)

MISS DOREEN BARBER, L.C.S.T.

MENTAL HEALTH SERVICE.

- 2 Duly Authorised Officers and one (Part-time) for relief purposes. (Mr. Neal, the Senior Duly Authorised Officer, died on 21st December, 1955.)
2 Female Occupation Centre Supervisors and Mental Health Workers (Mental Deficiency).
1 Male Assistant Occupation Centre Supervisor and Mental Health Worker.

DOMESTIC HELP SERVICE.

- MRS. P. M. GARDINER, Organiser of Domestic Helps.
(Until 2nd January, 1955.)
MRS. M. V. WARNER, Organiser of Domestic Helps.
(From 10th January, 1955.)
MRS. N. A. BYATT, Part-time Assistant Organiser of Domestic Helps.
The equivalent of 68 Domestic Helps (Full-time).
2 Home Advisers.

CLERICAL STAFF.

- *H. HOWARD, Senior Administrative Assistant.
F. BINGHAM, Chief Clerk, Sanitary Inspectors' Office.
35 Clerks.

*Holds the Certificates of the Royal Sanitary Institute for Sanitary Inspectors and Inspectors of Meat and Other Foods.

STATISTICAL

ANNUAL REPORT, 1955

STATISTICS.

Area (in acres)	...	...	...	...	8,165
Population (Census, 1951)	...	...	...	...	121,226
Estimated Mid-year Home Population	...	...	...	...	121,000
Number of inhabited houses (end of 1955 according to Rate books)	...	...	...	...	38,167
Rateable Value	...	...	...	...	£1,038,439
Sum represented by a penny rate	...	...	...	...	£4,170

VITAL STATISTICS.

LIVE BIRTHS.				Total.	Male.	Female.
Legitimate	...	...	...	1590	803	787
Illegitimate	...	...	...	97	51	46
				<u>1687</u>	<u>854</u>	<u>833</u>

Adjusted Birth Rate (Area Comparability Factor 1.00) 13.94

STILL BIRTHS.				Total.	Male.	Female.
Legitimate	...	...	...	33	15	18
Illegitimate	...	...	...	4	1	3
				<u>37</u>	<u>16</u>	<u>21</u>

DEATHS 1391 677 714

Adjusted Death Rate (Area Comparability Factor 0.91) 10.46

MATERNAL MORTALITY RATE:—

Per 1000 live births 0.0

Per 1000 Total (live and still births) 0.0

Deaths from Pregnancy, Childbirth,	1954.	1955.
Abortion	2	Nil

INFANTILE MORTALITY RATE :—

	1954.	1955.
All infants per 1000 live births ...	24.5	14.82
Legit. infants per 1000 legit. live births ...	21.7	15.1
Illegit. infants per 1000 illegit. live births	58.0	10.3

NEO-NATAL MORTALITY RATE :—			1954.	1955.
All infants per 1000 live births	...	...	15.03	8.89

DEATHS from Measles (all ages)	...	...	—	—
„ „ Whooping Cough (all ages)	...	...	2	—
„ „ Diarrhoea (under 2 years of age)	...	...	—	—

MORTALITY RATE :—1 to 5 years ... 0.06 per 1000 population

TUBERCULOSIS MORTALITY RATE :—

14 deaths from Pul. Tub. (death rate 0.116 per 1000 population).

2 deaths from other Tub. diseases (death rate 0.016 per 1000 population).

CANCER MORTALITY RATE :—

Malignant growths accounted for 289 deaths, with a death rate of 2.39 per 1000 population. The number of deaths in 1953 and 1954 were 256 and 225 respectively.

COMPARATIVE TABLE 1955.

	Norwich		England and Wales.
	1955.	1954.	
Birth Rate per 1000 population	...	...	15.0
Death Rate „	...	...	11.7
Still Birth Rate :—			
Per 1000 live and still-births	...	...	23.1
Per 1000 population	...	...	0.36
Maternal Mortality Rate per 1000 live and still-births	0.0	1.09	0.64
Infantile Mortality Rate per 1000 live births	...	...	24.9
Neo-Natal Mortality Rate per 1000 live births	...	...	17.3

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE COUNTY BOROUGH OF NORWICH DURING THE YEAR 1955
The following information has been supplied by the Registrar-General.

CAUSES OF DEATH.		All Ages	0—	1—	5—	15—	25—	45—	65—	75—
ALL CAUSES	...	1391	25	7	10	9	49	299	360	632
1 Tuberculosis, respiratory	...	14	—	—	—	—	5	6	2	1
2 Tuberculosis, other	...	2	—	—	1	—	1	—	—	—
3 Syphilitic disease	...	5	—	—	—	—	—	1	3	1
4 Diphtheria	...	—	—	—	—	—	—	—	—	—
5 Whooping Cough	...	—	—	—	—	—	—	—	—	—
6 Meningococcal infections	...	—	—	—	—	—	—	—	—	—
7 Acute poliomyelitis	...	2	—	—	—	—	2	—	—	—
8 Measles	...	—	—	—	—	—	—	—	—	—
9 Other infective and parasitic diseases	...	1	—	—	—	—	—	—	—	1
10 Malignant neoplasm, stomach	...	53	—	—	—	—	1	20	17	15
11 Malignant neoplasm, lung, bronchus	...	54	—	—	—	—	—	26	23	5
12 Malignant neoplasm, breast	...	26	—	—	—	—	2	15	6	3
13 Malignant neoplasm, uterus	...	14	—	—	—	—	2	8	1	3
14 Other malignant and lymphatic neoplasms	...	142	—	2	—	1	7	42	48	42

15	Leukæmia, aleukæmia	...	...	8	—	—	—	1	—	1	1	3	2
16	Diabetes	...	...	12	—	—	—	—	—	—	2	—	10
17	Vascular lesions of nervous system	...	...	247	—	—	—	—	1	1	35	56	154
18	Coronary disease, angina	...	...	192	—	—	—	—	—	3	42	76	71
19	Hypertension with heart disease	...	...	90	—	—	—	—	—	—	6	10	14
20	Other heart disease	...	...	196	—	—	—	—	1	6	19	38	132
21	Other circulatory disease	...	...	49	—	—	—	1	—	1	10	11	26
22	Influenza	...	...	8	—	—	—	—	—	—	2	1	5
23	Pneumonia	...	...	44	2	—	—	—	1	3	8	7	28
24	Bronchitis	...	...	70	1	—	—	—	—	—	14	16	39
25	Other diseases of respiratory system	...	...	11	—	—	—	—	—	1	4	3	3
26	Ulcer of stomach and duodenum	...	...	18	—	—	—	—	—	4	3	6	5
27	Gastritis, enteritis and diarrhœa	...	...	2	—	—	—	—	—	—	—	1	1
28	Nephritis and nephrosis	...	...	12	—	—	1	1	—	—	4	3	3
29	Hyperplasia of prostate	...	...	15	—	—	—	—	—	—	1	2	12
30	Pregnancy, childbirth, abortion	...	...	—	—	—	—	—	—	—	—	—	—
31	Congenital malformations	...	...	14	7	—	—	1	1	1	1	1	—
32	Other defined and ill-defined diseases	...	...	101	14	2	2	2	2	3	18	17	43
33	Motor vehicle accidents	...	...	9	—	—	—	2	1	2	1	2	1
34	All other accidents	...	...	26	1	—	—	1	1	—	5	4	14
35	Suicide	...	...	14	—	—	—	—	—	3	5	3	3
36	Homicide and operations of war	...	...	—	—	—	—	—	—	—	—	—	—

INFANTILE MORTALITY 1955.

DEATHS FROM STATED CAUSES IN WEEKS AND MONTHS UNDER ONE YEAR OF AGE.

Cause of Death	Under 1 Week	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.		2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months	10-11 Months	11-12 Months	Total Deaths under One Year
					4 Weeks.	4 Weeks.											
Accident ...	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1
Atelectasis ...	2	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	2
Bronchitis ...	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Broncho-pneumonia...	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	2
Congenital Defects ...	3	—	—	—	3	—	1	1	—	1	1	—	—	—	—	—	7
Injury at Birth ...	2	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	2
Premature Birth ...	7	—	—	—	7	—	—	—	—	—	—	—	—	—	—	—	7
Other Causes ...	1	—	—	—	1	—	—	—	—	—	1	—	1	—	—	—	3
TOTALS ...	15	—	—	—	15	1	1	2	—	2	3	—	1	—	—	—	25

PREVALENCE
AND
CONTROL
OF
INFECTIOUS
DISEASES

TUBERCULOSIS.

NOTIFICATIONS AND MORTALITY DURING 1955.

Age-Periods		Notifications.						Deaths					
		Respiratory			Non-Respiratory			Respiratory			Non-Respiratory		
		M.	F.	Total.	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Under 1 year	...	—	—	—	—	—	—	—	—	—	—	—	—
1—5 years	...	2	1	3	—	—	—	—	—	—	—	—	—
5—15	...	3	2	5	1	3	4	—	—	—	1	—	1
15—25	...	6	11	17	—	2	2	—	—	—	—	—	—
25—35	...	7	7	14	1	—	1	2	2	4	—	—	—
35—45	...	10	4	14	—	—	—	1	—	1	1	—	1
45—55	...	8	2	10	—	1	1	1	1	2	—	—	—
55—65	...	5	3	8	—	—	—	4	—	4	—	—	—
65 and over	...	3	1	4	—	—	—	2	1	3	—	—	—
TOTALS	...	44	31	75	2	6	8	10	4	14	2	—	2

In addition to the 83 new notifications, 23 further cases came to my notice in 1955 in other ways than by formal notification. 18 were transfers to the City from other areas, and 5 were obtained from the Death Returns. 21 were respiratory cases and 2 non-respiratory. Distribution of these further 23 cases is shown in the following table.

Age periods.		Respiratory.			Non-Respiratory.		
		M.	F.	Total.	M.	F.	Total.
Under 1 year	...	—	—	—	—	—	—
1—5 years	...	—	—	—	—	—	—
5—15 years	...	1	—	1	1	—	1
15—25	...	—	7	7	—	—	—
25—35	...	2	3	5	—	—	—
35—45	...	3	2	5	1	—	1
45—55	...	1	—	1	—	—	—
55—65	...	1	1	2	—	—	—
65 and over	...	—	—	—	—	—	—
Totals	...	8	13	21	2	—	2

In all, 106 cases of Tuberculosis, 96 lung and 10 other forms came to my knowledge during the year. The 10 non-respiratory were classified as follows :—

Age Periods.			Meninges	Bones and Joints	Peripheral Glands	Genito-Urinary
Under 1 year	...	...	—	—	—	—
1—5 years	...	...	—	—	—	—
5—15	„	...	1	—	4	—
15—25	„	...	—	1	—	1
25—35	„	...	—	—	1	—
35—45	„	...	—	1	—	—
45—55	„	...	—	—	1	—
55—65	„	...	—	—	—	—
65 and over	...	...	—	—	—	—
Totals			1	2	6	1

Of the cases notified 55.42 per cent. were males and 44.58 per cent. were females. 49.40 per cent were married, 45.78 per cent were single and 4.82 per cent. were widowed. A family history of Tuberculosis was ascertained in 25.3 per cent. of the cases.

The average age (years) at the time of notification was as follows :—

Respiratory	M.	37.73	Respiratory	M.&F.	34.59
Respiratory	F.	30.13	Non-respiratory	M.&F.	19.75
Non-respiratory	M.	18.00	All forms	M.&F.	33.16
Non-respiratory	F.	20.33			

Notifications in 1955 totalling 83 were 2 lower than the figure for the previous year. Respiratory notifications increased by 5, non-respiratory decreased by 7. The age groups under 15 claimed 8 of the 75 respiratory and 4 of the 8 non-respiratory notifications.

DEATHS.

Deaths from all forms of Tuberculosis during the year numbering 16 were slightly higher than the two previous years. The figure for 1954 was 11 and for 1953 14. The death rate per thousand population in respiratory cases was 0.116 compared with 0.058 in 1954 and 0.108 in 1953. There was a decrease in the

number of deaths from non-respiratory Tuberculosis, there being 2 compared with 4 in 1954, the corresponding death rates per 1000 population being 0.016 and 0.033. The total death rate from respiratory and non-respiratory Tuberculosis of 0.132 per 1000 population was slightly higher than those for 1954 (0.091) and 1953 (0.116).

Respiratory Tuberculosis accounted for 14 deaths and non-respiratory Tuberculosis for 2 deaths.

The deaths occurred at the following periods during 1955 :—

				Respiratory.	Non-respiratory.
January	...	...	...	2	—
February	...	...	...	—	—
March	...	...	...	2	—
April	...	...	...	1	—
May	...	...	...	1	—
June	...	...	...	2	1
July	...	...	...	—	1
August	...	...	...	1	—
September		...	...	2	—
October	...	...	...	1	—
November		...	...	2	—
December	...	...	...	—	—

Of the total deaths from Tuberculosis 5—3 respiratory and 2 non-respiratory—had not been notified during life. Deaths in institutions numbered 6.

MASS MINIATURE RADIOGRAPHY UNIT SURVEY.

I am indebted to Dr. T. J. O'Riordan, Director of the Mass Miniature Radiography Unit, for his report on the activities of his unit during the past year.

This unit is one of the services provided by the East Anglian Regional Hospital Board and is based in Norwich, but covers a wide area of East Anglia. The unit was established in Norwich from the 14th March to 11th July. During the period of Civic Week, 18th to 25th June, the unit was at St. Andrew's Hall and was there used by 1,847 persons who visited the exhibition.

A total number of 26,108 persons had miniature chest X-ray examinations, 16,269 of whom were Norwich residents. Active pulmonary tuberculosis was discovered in 19 instances, of whom 14 lived in the city. In the body of his report Dr. O'Riordan has this to say: "The incidence of newly-discovered active pulmonary tuberculosis cases of 0.72 per thousand is low compared with most areas in Great Britain." The corresponding figure for Norwich City was 0.86 per thousand of those examined. School staff examined numbered 936 (670 city staff) and no case of tuberculous disease was found.

Dr. O'Riordan has very kindly agreed to provide facilities for chest X-ray examination at his unit of any positive Heaf test reactors found amongst the 14-year-old school children who are tested in connection with the B.C.G. scheme for school leavers and also their family contacts. During the year 63 such reactors were X-rayed, one of whom was found to be suffering from tuberculosis.

DEATHS AND DEATH-RATES FROM TUBERCULOSIS.

Year	Population	Deaths			Death-rate per 1000 of population		
		Respiratory Tuberculosis	Non-Respiratory Tuberculosis	Tuberculosis (all forms).	Respiratory Tuberculosis	Non-Respiratory Tuberculosis	Tuberculosis (all forms).
1893-99	Averages {	138	93	231	1.27	0.85	2.12
1900-09		144	87	231	1.23	0.74	1.97
1910-19		138	59	197	1.16	0.50	1.66
1920-29		115	25	140	0.93	0.20	1.13
1930	124,900	78	12	90	0.624	0.096	0.72
1931	126,100	77	11	88	0.61	0.08	0.69
1932	126,600	100	12	112	0.79	0.09	0.88
1933	126,100	93	15	108	0.737	0.118	0.855
1934	125,700	97	20	117	0.77	0.16	0.93
1935	124,700	77	9	86	0.62	0.07	0.69
1936	123,700	75	23	98	0.606	0.186	0.792
1937	123,000	61	11	72	0.5	0.089	0.58
1938	122,300	63	6	69	0.515	0.049	0.56
1939	120,900	73	10	83	0.604	0.082	0.686
1940	115,400	65	11	76	0.563	0.095	0.658
1941	111,810	57	11	68	0.51	0.098	0.608
1942	106,100	59	6	65	0.556	0.056	0.612
1943	101,160	73	10	83	0.721	0.099	0.82
1944	101,600	72	11	83	0.709	0.108	0.817
1945	103,540	56	10	66	0.541	0.097	0.637
1946	112,390	68	11	79	0.605	0.098	0.703
1947	114,900	63	12	75	0.548	0.104	0.652
1948	118,000	54	7	61	0.458	0.059	0.517
1949	119,000	45	4	49	0.378	0.034	0.412
1950	119,700	40	6	46	0.334	0.050	0.384
1951	120,300	31	9	40	0.257	0.075	0.332
1952	120,300	33	4	37	0.274	0.033	0.307
1953	120,900	13	1	14	0.108	0.008	0.116
1954	121,250	7	4	11	0.058	0.033	0.091
1955	121,000	14	2	16	0.116	0.016	0.132

OTHER INFECTIOUS DISEASES.

Notifications of Dysentery (740) and of Food Poisoning (166) were the highest recorded in the city. These two diseases constituted the major problem of infectious disease control. Two cases of Typhoid fever, though unsought for, provided a good and useful exercise in epidemiology, but unfortunately the source of infection was not found in either case. Participation with the Medical Research Council Committee at clinical trials of Influenza vaccine was hampered by the presence of Poliomyelitis in the city which precluded the use of the vaccine but the result of the Influenza Spotting scheme compared very favourably with those obtained in the 16 other centres included in the trials.

Poliomyelitis accounted for 6 paralytic and 1 non-paralytic cases, and 2 deaths. 1 of the deaths was in a case which was not notified.

DYSENTERY.

An epidemic of dysentery has occurred in the city each year since 1951, the pattern of the epidemic has been similar throughout in that the first cases have occurred in or about the month of November, the number of notifications then reach a maximum in the first quarter of the following year and decrease throughout the second and third quarter of the year. It is probably true to say that dysentery is now endemic in Norwich. The following table shows the trend over the past ten years.

TABLE A.

Number of notifications each year of Dysentery
and Food Poisoning for the past 10 years.

			Dysentery.	Food Poisoning.
1946	...	...	19	11
1947	...	...	4	84
1948	...	...	10	39
1949	...	...	34	30
1950	...	...	8	61
1951	...	...	695	27
1952	...	...	732	30
1953	...	...	243	31
1954	...	...	725	100
1955	...	...	740	166

The cause of the increase in the number of notifications over the past 5 years is not apparent at the moment although part may be due to more accurate diagnosis but this certainly does not account for the present prevalence of the disease.

Dysentery has showed a marked change over the past 20 years from being a fairly severe infection, especially in the very young and the very old, to a much milder form of the disease. This is probably due to the fact that *Shigella sonnei* has largely replaced

Shigella flexneri as the causative organism. The disease is now characterised by diarrhoea, which may not be troublesome, with or without abdominal pain and/or vomiting, and rarely blood in the stools. The course of the disease even without treatment is one of rapid recovery from the clinical symptoms and signs of the disease but unfortunately this recovery is not always accompanied by a similar rapid disappearance of the causative organisms from the stools.

There was a total of 740 notifications of dysentery in the year compared with 725 in the previous year; of this total 328 cases were school children. There were 29 foodhandlers involved, and a further 58 foodhandlers were household contacts of cases.

Reference to Tables B and C reveal that the pattern of the disease in 1955 was very similar to that in the previous year. In both years the greatest number of cases occurred in the 5—14 year old age group accounting for 40% of the total number of notifications. As before the geographical distribution shows that the North West sector of the city was most affected.

TABLE B.

Incidence of Dysentery by age and quarter of the year.

	1st Quarter		2nd Quarter		3rd Quarter		4th Quarter		Total	Percentage
	M.	F.	M.	F.	M.	F.	M.	F.		
Under 5 ...	56	51	30	20	7	6	16	16	202	27 (28)
5—14 ...	96	77	35	26	9	3	21	31	298	40 (42)
15—44 ...	40	46	12	21	5	7	20	33	184	25 (24)
45—64 ...	6	12	2	5	3	1	1	7	37	5 (4)
64 and over	—	8	—	4	—	1	1	5	19	3 (2)
Totals	198	194	79	76	24	18	59	92	740	
	392		155		42		151			
	(381)		(155)		(40)		(149)		(725)	

Figures for 1954 are in brackets.

TABLE C.

Geographical distribution of Dysentery by quarters of the year.

	Sector of the City.				Total
	N.W.	N.E.	S.W.	S.E.	
1st Quarter ...	149	76	87	80	392
2nd Quarter ...	76	7	46	26	155
3rd Quarter ...	18	3	8	13	42
4th Quarter ...	62	31	25	33	151
	305	117	166	152	740
	(449)	(76)	(63)	(137)	(725)

Figures for 1954 are in brackets.

The distribution of cases of Dysentery amongst school children is set out in Table D where it will be seen that the distribution of the disease was very similar to the previous year.

TABLE D.

Distribution of cases of Dysentery according to type of School.

Type of School.	No. of Schools.	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Total.	Total for 1954.
Nursery ...	1	6	2	—	—	8	16
Infants ...	19	80	36	5	28	149	183
Junior ...	15	61	23	6	16	106	86
Secondary Modern	12	22	6	1	7	36	18
Secondary Grammar	3	4	—	—	8	12	9
Junior Technical	1	7	—	—	1	8	2
Special Schools E.S.N.	1	1	—	—	—	1	9
P.D.	1	—	1	—	—	1	4
Private ...	2	7	—	—	—	7	2
<hr/>							
1954 figures ...	55	188	68	12	60	328	
Teachers ...	47	171	80	10	68	329	329
Meals Staff ...	—	2	—	—	1	3	5
	—	3	—	—	—	3	

TABLE E.

Sickness rate in cases of Dysentery expressed as percentage.

Type of School.	No. of Children.	No. of Cases.	Sickness Rate % 1955.	1954.
Nursery ...	89	8	8.9	18.5
Infants ...	5067	149	2.7	3.5
Junior ...	7333	106	1.4	1.2
Secondary Modern ...	4680	36	0.7	0.4
Secondary Grammar ...	2344	12	0.5	0.4
Junior Technical ...	349	8	2.2	0.6
Special Schools—E.S.N.	137	1	0.7	6.5
P.D.	94	1	1.1	4.1
Private ...	—	7	—	—

In Table E the sickness rate expressed as a percentage of the number of pupils in each type of school shows that it is highest in the nursery schools though the rate is less than half of that for 1954. The rates for the special schools show an even greater reduction compared with the previous year. The number of children in the 5—14 year old group was 298 (304 in 1954) and was composed of 161 boys and 137 girls. One school child was admitted to the Isolation Hospital for treatment. Of the 7 children in private

schools 5 attended a school outside the city boundary. The investigation of contacts of cases revealed 73 school children who were excreting the organisms of dysentery but had no symptoms and they are included in the total of 328. Investigation of four cases of dysentery which occurred at the same time in one school previously clear revealed an assistant in a central canteen to be the symptomless excretor. She was referred to her own doctor for treatment and did not resume work until 3 stool specimens were reported to be negative.

It would now appear that Dysentery is spread more commonly by personal contact than by food, and this mode of spread will explain the higher sickness rate among younger school children despite the endeavours of the teaching staff who are aware of the position.

In its present phase the disease presents many problems in epidemic control because so much depends upon the personal cleanliness and hygiene of the population. In addition, the size of the infector pool, the symptomless excretors, is not known, and it is felt that only the fringe of the problem is being touched.

Each case is thoroughly investigated and an attempt is made to determine the cause of infection. Satisfaction was achieved in one instance early in the year. In this case a foodhandler on a cold meat and cheese counter of a grocer's shop had diarrhoea and stayed off work for 2 days without consultation with his general practitioner. New cases of the disease were notified soon after his return to work, and it was thought that he infected about 10 families before he was detected.

After a brief respite in late October and early November new cases were regarded with great suspicion as the heralds of yet another epidemic and each case was carefully scrutinised. Where it was noted from the Sanitary Inspector's reports on the investigation of these first cases that a shop was mentioned on two occasions as a place where food which might be a vehicle for infection was bought, enquiries were made of each member of the staff as regards any recent illnesses and stool specimens were requested for bacteriological examination. Whilst these investigations (which turned out to be negative) were proceeding in a shop in the northern part of the city three further cases suddenly appeared in the south east sector of the city, among whom the bread server was found to be the only common factor. His case was investigated but he was found to be non-infectious. One bakery which supplies a large number of households in the city was also visited, foodhandlers submitted stool specimens, and samples of 16 raw ingredients were examined bacteriologically, all with negative results.

Dysentery is a preventable disease, the incidence of which could be very much reduced if everyone would wash their hands

thoroughly after visiting the toilet. Wherever possible free hand washing facilities should be provided adjacent to lavatories provided for public use. Supervision is required to avoid waste of paper towels, etc., but where such provision has been made the public do avail themselves willingly.

The work involved in the investigations of dysentery is very large indeed and tribute must be made to the excellent work and co-operation of Dr. Dowsett and her staff at the Public Health Laboratory who carried out 4,240 faecal examinations (3,593 in 1954), to the Director of Education and the teaching staffs and to the Sanitary Inspectors who visited many homes in the execution of their duties, also to the Infectious Diseases Clerks who had to interview many callers in connection with this very troublesome and preventable complaint.

FOOD POISONING.

166 cases of food poisoning were notified during the year and reference to Table A under the heading of Dysentery shows the notifications over the past 10 years. 4 organisms were found to be responsible, namely, *Cl. Welchii* 17, *S. typhimurium* 132, *S. thompson* 2, *S. enteritidis* 4, and in 11 cases no organisms were found on bacteriological examination of the stools. Eight of these cases were foodhandlers and 11 foodhandlers were household contacts of a case.

Like dysentery the organisms causing food poisoning gain access to the body through the mouth but whereas personal contact seems to play the major role in the case of dysentery, the organisms of food poisoning are present in the food consumed by the patient.

There is a possibility that the increasing incidence of this disease is due to the use of imported egg albumen. Recent investigation of samples of this commodity has revealed contamination with a variety of organisms capable of causing food poisoning. This type of product is used in the bakery trade sometimes without cooking as in certain forms of icing. Consequently it was thought wise to issue written instructions on its use to all bakeries in the city. Bakers were instructed to submit any food for which egg albumen constituted an ingredient to a temperature of 212° F for 10 minutes and samples were taken of ingredients before baking, and of the product, for bacteriological examination. It was found that this temperature was sufficient to destroy all food poisoning organisms.

The 17 cases of food poisoning due to infection with *Cl. Welchii* occurred in one small and interesting outbreak, the story of which is as follows :—

The Manager of a City Works notified me on the 28th April that of 42 diners who had roast pork for lunch the previous day

in the canteen, 17 had the symptoms and signs of food poisoning 6-9 hours later. All the men recovered and were at work again the next day. Investigations were instituted on the same day and as a result the organism was isolated from the stools of the affected persons and the pork was found to be heavily contaminated, especially near the bone, where the meat was not thoroughly cooked. The organism was not isolated from the stools of the canteen workers or from the butcher and his assistants who supplied the pork. Investigation was not carried back to the slaughterhouse because it was considered that nothing could be gained as previous scientific work has shown that *Cl. Welchii* was often present in the scrapings from the floors of slaughterhouses. It was assumed that the pork was infected before delivery to the canteen on the 25th April when it was placed in the canteen refrigerator. It was cooked on the 26th and returned to the refrigerator again when cool, and taken out and warmed on the 27th before serving for lunch. This method of preparation was definitely at fault as it allowed for the multiplication of the organisms especially as the pork was under-cooked. The regulator of the refrigerator was also found to be at fault in that the temperature was above 35° F indicated on the regulator.

Incidence of Food Poisoning by age and quarter of the year.

Age Group	1st Quarter		2nd Quarter		3rd Quarter		4th Quarter		Total	Percentage
	M.	F.	M.	F.	M.	F.	M.	F.		
Under 5 ...	4	3	6	7	6	6	4	2	38	23
5—14 ...	3	2	14	11	3	12	7	2	54	33
15—44 ...	—	2	4	7	10	11	3	2	39	23
45—64 ...	1	1	2	1	1	3	1	3	13	8
65 and over	—	—	—	4	—	—	—	—	4	2
Unknown ...	—	—	17	—	—	—	—	1	18	11
<hr/>										
	8	8	43	30	20	32	15	10	166	100
	16		73		52		25			

Geographical Distribution of Food Poisoning by Quarters of the Year.

		Sector of City.			
		N.W.	N.E.	S.W.	S.E.
1st Quarter	...	3	12	—	1
2nd Quarter	...	32	8	13	20
3rd Quarter	...	19	19	2	12
4th Quarter	...	5	15	5	—
		<hr/>	<hr/>	<hr/>	<hr/>
		59	54	20	33
		<hr/>	<hr/>	<hr/>	<hr/>

TYPHOID.

An unusual event during the year was the appearance of two cases of typhoid fever. Once prevalent, the disease is now a rarity in communities where there are high standards of hygiene.

Therefore, its appearance in this country is a signal for the mobilisation of the resources of the Public Health Department of the area in which it occurs to ascertain the source and combat the spread of infection. This aspect of public health work is facilitated by the ready identification in a laboratory of different strains of the typhoid bacillus. By these means it was proved that there was no connection between the two cases nor with any previous known cases, but the source of infection was not found in either case and no further suspicious cases came to my notice.

The first notification was received on the 4th May in respect of a 64 year old married woman living in the City Road area. The onset of the disease was on the 11th April and the indefinite signs and symptoms gave no indication of the seriousness of the malady until the patient passed a blood stained stool on the 2nd May. A sample was submitted by the general practitioner to the Public Health Laboratory which reported the presence of pure culture of bacillus typhosus (Vi strain unclassified) on the 4th May. The patient made an uneventful recovery in the Isolation Hospital.

The second case was notified on the 2nd September in respect of a 17 year old unmarried girl who was first taken ill on the 19th August, and as her condition did not improve she was admitted to the West Norwich Hospital on 30th August where typhoid fever was suspected. She was transferred to the Isolation Hospital on the 2nd September on bacteriological confirmation (Vi phage type A) of the clinical diagnosis. This patient also made a rapid and full recovery.

The investigation of the first case was complicated because her husband had a positive Widal reaction S. typhi H of 1 in 80, which is a high titre, but S. typhi Vi agglutination was negative. He had been in the East with H.M. Forces between 1917 and 1920, during which period of service he had "Colitis", a very suspicious occurrence. Her daughter, who visited the Continent in the summer of 1954, also had a positive Widal reaction S. typhi O of 1 in 160 which later rose to 1 in 320, but the S. typhi Vi agglutination remained negative throughout the period of investigation which covered three weeks. During this time samples of faeces and urine from the husband and daughter were bacteriologically examined daily for S. typhi and five blood samples were serologically examined in the same period. It was only after these exhaustive examinations that the husband and daughter were considered not to be a source of infection.

In both instances the investigations followed roughly the same lines, that is an immediate bacteriological examination of samples of water taken from each tap in the household and from taps at the place of work in the second case. Arrangements were made for bacteriological examination of faeces and urine from all members of the household every other day for a period of two weeks, and for an ascertainment of presence of antibodies and their phage type in blood samples taken from contacts on the tenth day after the removal of the patient to hospital. Samples

of the type of food consumed by the patients which might possibly have been infected with the organisms were also submitted for laboratory investigation. In the first instance investigations also included bacteriological examination of large swabs lowered into 8 manholes on the sewerage system in the vicinity of the patient's home address in an attempt to ascertain the presence or otherwise of an excretor of typhoid bacilli in the neighbourhood.

A careful enquiry was made into the movements of the patients and contacts of the patients during the period of 3 weeks prior to the onset of symptoms and in both cases it was found that the patient did visit towns outside the immediate neighbourhood of Norwich where it is thought that they may have picked up infection, although in one instance examination of sewer swabs similar to that carried out in Norwich failed to produce any evidence of infection with typhoid bacilli in the district.

INFLUENZA.

The Medical Research Council Committee on Clinical Trials of Influenza Vaccines arranged for field trials of the vaccine during the winter of 1954/55 and Norwich was selected with 16 other towns as a centre for research. The principle of the trial was the inoculation of volunteers with the vaccine and this was linked with an influenza spotting scheme in which samples of blood from typical cases of acute influenza were submitted to serological tests to ascertain the strain of virus responsible for the infection. The scheme was operated for 21 weeks commencing on the 6th December, 1954, to the 30th April, 1955, and the aim was to determine the probable date of appearance and disappearance of influenza in the trial areas, at the same time giving some indication of the proportion of infections due to Virus A and Virus B. Unfortunately the prevalence of poliomyelitis in Norwich in December, 1954, necessitated the cancellation of the influenza vaccine inoculations.

Eight Norwich General Practitioners co-operated in the influenza spotting scheme and between them diagnosed 79 cases of acute influenza; of these 35 showed the presence of Virus B in blood samples. This was the greatest number of isolations of Virus (both A and B) in any centre, amounting roughly to 50% of the number of clinical diagnoses in Norwich. No other centre showed such a high percentage of isolation of Virus to clinical cases. Virus A was not isolated in Norwich throughout the duration of the scheme.

In the overall picture from the 17 centres Norwich experienced the most intense outbreak, commencing in the week ended 19th December, 1954, and finishing in the week ended 20th February, 1955, with the maximum number of 8 isolations of Virus B in the week ended 2nd January, 1955. The pattern of the disease in

Norwich as revealed by Virus isolation showed the typical gradual increase to a maximum and then falling away, which was not to be seen in other centres.

I am grateful that Norwich was included in this scheme and thank the General Practitioners who volunteered to make it such a success in this area. The isolation of Virus was carried out by Dr. Dowsett of the Public Health Laboratory, Norwich, on the blood specimens submitted by the General Practitioners.

POLIOMYELITIS.

Notification of 6 cases of paralytic and 1 case of non-paralytic Poliomyelitis were received. There were two deaths attributable to this disease; one in a case which was not notified. The following table shows the salient features :—

TABLE I.
Poliomyelitis Notifications, 1955.

	Age.	Date of Onset.	Date Notified.	Remarks.
Male	30 yrs.	16.9.55	19.9.55	Paralytic. Admitted Isolation Hospital. Died 21.9.55.
Male	36 yrs.	23.9.55	29.9.55	Admitted Isolation Hospital 29.9.55 and died the same day. (This case was not notified).
Male	4 yrs.	3.10.55	10.10.55	Paralytic. Admitted Isolation Hospital. In Convalescent Hospital, leg and back affected.
Male	6 yrs.	6.10.55	14.10.55	Paralytic. Admitted Isolation Hospital. In Convalescent Hospital, legs and back affected.
Male	3 yrs.	23.10.55	29.10.55	Non-paralytic, bulbar. Admitted Isolation Hospital. Full recovery, discharged from Hospital.
Female	25 yrs.	27.10.55	31.10.55	Paralytic, bulbar. Admitted Isolation Hospital. Good recovery, discharged from Hospital.
Female	32 yrs.	4.12.55	9.12.55	Paralytic, bulbar. Admitted Isolation Hospital. Still in Hospital making good recovery.
Female	29 yrs.	28.11.55	24.12.55	Paralytic. Late notification. Not admitted to Hospital. One muscle group in one arm affected. No disability.

The number of cases of bulbar poliomyelitis (3) accounts for nearly 50% of the notifications which is a higher proportion than usual. It was not possible to trace a direct link of contact between any of these cases.

Table II shows the trend of notification of poliomyelitis over the past 10 years in Norwich and in England and Wales.

TABLE II.

Incidence of Poliomyelitis over the last 10 years.

Year.			Norwich Figures.	National Figures.	Norwich Deaths.
1946	...	...	—	315	—
1947	...	...	28	3696	2
1948	...	...	18	855	1
1949	...	...	20	3184	—
1950	...	...	23	4125	1
1951	...	...	7	1281	—
1952	...	...	10	2130	2
1953	...	...	10	2298	1
1954	...	...	12	1108	—
1955	...	...	8	3453*	2

*Provisional figure.

Examination of the national figures shows that omitting the figures for 1946 and 1947, a year of low incidence is followed by two years of high incidence. This cycle is repeated twice in the period under review and it would be of interest to see whether poliomyelitis affects the country in cycles as is the case with measles but with a different periodicity. The figures for Norwich do not follow the national pattern on account of relatively few cases of the disease occurring in a small community.

SCARLET FEVER.

65 cases, compared with 144 in 1954, were notified. One case was admitted to hospital. No death occurred.

The bacteriological examination of Scarlet Fever contacts was continued during 1955. The number of cases detected and treated is given on page 139.

DIPHTHERIA.

No case was notified during the year.

WHOOPING COUGH.

304 notifications were received compared with 594 in 1954. 5 cases were admitted to hospital. No death occurred.

MEASLES.

118 cases were notified during the year. 3 cases were admitted to hospital. No death occurred.

MENINGOCOCCAL INFECTION.

2 cases were notified and were admitted to hospital. There was no death.

PNEUMONIA.

Acute primary pneumonia notifications decreased from 106 to 62 and acute influenzal pneumonia from 15 to 9. 9 deaths occurred from acute primary pneumonia and 2 from acute influenzal pneumonia.

ERYSIPELAS.

6 cases were notified compared with 17 in 1954. No case was admitted to hospital and no death occurred.

JAUNDICE.

24 cases were notified in accordance with the Jaundice Regulations, 1943, compared with 34 in 1954.

PUERPERAL PYREXIA.

53 cases of puerperal pyrexia were notified, 41 from institutions and 12 from domiciliary practice. The following table shows the causes:—

Nature of Condition.			Domiciliary.		Institutional.
Cause unknown	...	...	6	...	6
B. Coli infection	...	...	1	...	5
Mastitis	...	...	3	...	9
Retention of Membranes	...	...	1	...	—
Hæmolytic Streptococcal infection	...	...	1	...	5
Endometritis	...	...	—	...	6
Thrombophlebitis legs	...	...	—	...	2
Post-operative bronchitis	...	...	—	...	1
Post-operative pneumonia	...	...	—	...	1
Non-associated infection	...	...	—	...	4
Anæmia	...	...	—	...	2

OPHTHALMIA NEONATORUM.

Notifi- cations	Domi- ciliary Confine- ments	Institu- tional Confine- ments	Vision Unimpaired	Vision Impaired	Total Blindness	Removed from District
14	13	1	14*	—	—	—

*As far as can be ascertained by the Health Visitors and enquiries of the Doctors in charge of the cases.

SCABIES AND VERMINOUS CONDITIONS.

8 notifications of Scabies were received from General Practitioners and 5 cases came to my knowledge from other sources, a total of 13 compared with 25 in 1954. In addition 1

contact examined at the Scabies Clinic was found to be suffering from Scabies (13 in 1954) making a total of 14 known cases.

These conditions were treated at the Public Health Offices and in addition 4 Scabies contacts not infected attended for treatment during the year. 7 persons sent by the Norfolk County Council also attended for treatment.

Notifications were received from General Practitioners that 2 persons were infested with vermin and 3 cases came to my knowledge from other sources.

NOTIFIABLE DISEASES.

(1)		(2)		(3)	(4)
Disease.		Total cases notified by Medical Practitioners.		Cases admitted to Hospital.	Total number of Deaths of City Persons.
Scarlet Fever	65	1	—
Whooping Cough	304	5	—
Measles	118	3	—
Acute Poliomyelitis (paralytic)	6	5	2(a)
Acute Poliomyelitis (non-paralytic)	1	1	—
Meningococcal infection	2	2	—
Typhoid Fever	2	2	—
Acute Primary Pneumonia	62	9	9
Acute Influenzal Pneumonia	9	3	2
Erysipelas	6	—	—
Dysentery	740	6	—
Food Poisoning	166	3	—
Jaundice	24	—	—
Puerperal Pyrexia	53	42	—
Ophthalmia Neonatorum	14	—	—
Scabies	8	—	—
Verminous Conditions	2	—	—

(a) 1 not notified.

ANALYSIS OF TOTAL CASES OF INFECTIOUS DISEASES NOTIFIED IN AGE GROUPS.

Disease	Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 and over	Age unknown	Total
Scarlet Fever ...	1	1	5	6	6	86	7	1	1	1	—	—	—	65
Whooping Cough ...	42	32	31	45	48	98	3	1	3	—	—	1	—	304
Measles ...	4	17	16	22	19	30	2	2	4	1	—	—	1	118
Acute Poliomyelitis (paralytic) (non-paralytic)	—	—	—	—	1	1	—	—	3	1	—	—	—	6
Meningococcal infection ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Typhoid Fever ...	—	—	—	—	—	1	—	—	—	—	—	—	—	2
Acute Primary Pneumonia ...	—	—	—	—	—	—	—	1	—	—	1	—	—	2
Acute Infl. Pneumonia ...	—	1	4	—	1	4	4	2	8	8	12	17	1	62
Erysipelas ...	—	—	—	—	—	—	—	—	2	1	5	1	—	9
Dysentery ...	—	—	—	—	—	—	—	—	—	—	6	—	—	6
Food Poisoning ...	31	48	40	38	45	212	86	23	102	59	37	19	—	740
Jaundice ...	4	7	10	8	9	35	19	5	24	10	13	4	18	166
Puerperal Pyrexia ...	—	—	—	2	—	8	3	1	3	1	4	2	—	24
Ophthalmia Neonatorum ...	14	—	—	—	—	—	—	8	33	10	—	—	2	53
Scabies ...	—	—	1	—	—	1	1	—	—	—	—	—	—	14
Vermin ...	—	—	—	—	—	—	—	—	—	2	2	—	—	8
	—	—	—	—	—	—	—	—	—	1	1	—	—	2

ANALYSIS OF DEATHS FROM NOTIFIABLE DISEASES IN AGE GROUPS.

Disease	Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 & over	Total
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	1	1	—	—	2 (a)
Acute Primary Pneumonia ...	—	—	—	—	—	—	—	—	—	1	1	7	9
Acute Influenzal Pneumonia ...	—	—	—	—	—	—	—	—	1	—	1	—	2

(a) 1 case not notified.

LABORATORY WORK.

The Director (Dr. L. M. Dowsett) of the Public Health Laboratory, situated at Bowthorpe Road, kindly sends me the following report of the work done for Norwich at that laboratory.

During the year, 11,847 specimens were examined at the Public Health Laboratory from the Public Health Department and the General Practitioners in the city.

Nose and throat swabs	...	...	3687
Sputum	...	...	322 (a)
Fæces and urine	...	...	6320
Water	...	...	496
Milk	...	...	251
Miscellaneous	...	...	771
			<hr/> 11847 <hr/>

(a) Specimens of sputa sent for examination from the Chest Clinic have not been included.

TREATMENT OF VENEREAL DISEASES.

Clinics are held on Monday afternoons, Tuesday mornings and Friday evenings in a special portion of the Norfolk and Norwich Hospital Out-patients' Department.

Dr. H. L. Rogerson, the Consultant Venereologist at the Norfolk and Norwich Hospital has kindly sent me the following :—

The number of fresh cases of venereal disease, and the number of attendances of all patients during 1955 was almost the same as in the previous year. There were no cases of primary or secondary syphilis. Cases of late syphilis appear with the same frequency as hitherto. This is to be expected for some years to come.

There was a rise in the incidence of gonorrhœa during the summer, but whereas the ratio of male cases to female cases in the past has been three to one, this year it has been less than two to one, the total number of cases being 44. The incidence dropped again following the summer rise, and this may be due to the fact that more females have been traced and treated.

Non-gonococcal urethritis in the male continues to present a problem since it does quite frequently occur in married couples where there has been no extra-marital coitus. There were a few less cases than in the previous year.

It is still recommended that all pregnant women who have been treated for acquired syphilis in the past, have a course of treatment during subsequent pregnancies.

NATIONAL
HEALTH
SERVICE
ACT, 1946

HOSPITALS USED BY INHABITANTS OF THE AREA.

(Under the East Anglian Regional Hospital Board)

(a) NORFOLK AND NORWICH HOSPITAL. This is a general hospital with a large out-patient department. It has a total of 441 beds, including 28 for eye cases, and the daily average number of beds occupied was 382 compared with 379 in 1954.

(b) THE JENNY LIND HOSPITAL. The Jenny Lind Hospital which works in close co-operation with the Norfolk and Norwich Hospital, has 80 beds and admits boys under 11 years and girls under 12 years of age, not suffering from an infectious or contagious disease. There is also an out-patient department. The daily average number of beds occupied was 55, as in 1954.

(c) THE WEST NORWICH HOSPITAL. In accordance with the Ministry of Health new classification of hospitals the West Norwich Hospital comes in the category "Partly Acute", i.e. having accommodation for both acute and chronic sick cases. The hospital provides 279 beds, of which 170 are for acute cases, and 109 for chronic sick patients. The Regional Burns and Plastic Unit is located at this hospital. The daily average number of beds occupied was 218 compared with 241 in 1954.

(d) NORWICH ISOLATION HOSPITAL has 100 beds (including 16 as Infectious Diseases Reserve). 24 beds are allocated for cases of Pulmonary Tuberculosis, and there are two blocks containing 28 cubicles for patients suffering from infectious diseases. The daily average number of beds occupied was 71 compared with 62 in 1954.

(e) HELLESDON HOSPITAL for Mental Cases has 294 beds for males and 449 for females. The number of beds actually occupied, however, was 820—340 males and 480 females. The statutory accommodation at the Bethel Hospital, Bethel Street, is 125 and 121 beds are occupied, all by females.

(f) ACCOMMODATION FOR MENTAL DEFECTIVES. See pages 73 and 74.

(g) DRAYTON HALL MATERNITY HOME provides 17 beds for General Practitioner cases. The daily average number of beds occupied was 12.9 compared with 13.0 in 1954.

(h) WHITLINGHAM HOSPITAL, TROWSE, was opened on the 16th May, 1955, in premises formerly known as Crown Point Hall, and provides, at present, 86 beds for the chronic sick. It is intended ultimately to increase the bed complement to approximately 120. The average number of beds occupied during the period from the date of opening to the end of the year was 76.

CARE OF MOTHERS AND CHILDREN.

(Section 22)

Bookings of maternity cases for institutional confinement can still be made at the Municipal Clinic, 4, Earlham Road. Preference for admission to an institution was given to those cases (a) who had previous medical complications, or (b) who were liable to have complications in their confinement, or (c) whose home conditions were unsuitable for domiciliary confinement.

With the exception of categories (a) and (b) the home conditions of each case were investigated by the domiciliary midwives. 263 applications were received for admission to an institution. 92 cases were assessed without visitation. Of the remaining 171 cases, 156 were recommended for admission to an institution and 15 for domiciliary confinement.

In addition, on behalf of the Hospital authorities the domiciliary midwives inspected the homes of patients who had applied to their private doctors for institutional confinement on non-medical grounds. 596 cases were visited during the year and institutional confinement was considered necessary in 445 cases, and not necessary in 151 cases.

ANTE-NATAL AND POST-NATAL CLINICS.

Four Ante-natal sessions were held at the Central Clinic, 4, Earlham Road, each week, and Post-natal Clinics were held on the 1st and 3rd Friday afternoons in the month.

Attendances at the Ante-natal Clinics during the year were as under :—

Clinic	First Attendances	Cases continuing from 1954	Total No. of Mothers attending	Total Attendances	No of Sessions held	Average No. Attending
4, Earlham Road	582	89	671	2359	203	12
Catton Grove ...	141	19	160	568	47	12
Larkman Lane...	163	29	192	753	47	16
Lakenham ...	70	11	81	270	24	11
Rosebery Road	110	3	113	255	24	11
Thorpe ...	68	4	72	142	23	6
West Earlham ...	40	14	54	214	22	10
Tuckswood ...	40	9	49	214	24	9
	<hr/> 1214 <hr/>	<hr/> 178 <hr/>	<hr/> 1392 <hr/>	<hr/> 4775 <hr/>	<hr/> 414 <hr/>	<hr/> 11 <hr/>

In 1954 1333 mothers made 5196 attendances.

The attendances at the Post-natal Clinics were as under :—

Clinic.	First Attendances.	Cases continuing from 1954.	Total No. of Mothers Attending.	Total Attendances.
4, Earlham Road	... 99	9	108	173
Catton Grove	... 17	2	19	23
Larkman Lane	... 27	—	27	44
Lakenham ...	... 8	1	9	10
Rosebery Road	... 18	—	18	23
Thorpe ...	... 6	—	6	7
Tuckswood ...	... 14	1	15	28
	<hr/> 189	<hr/> 13	<hr/> 202	<hr/> 308

In 1954 227 mothers made 377 attendances.

BLOOD TESTING.

The majority of the General Practitioners refer their cases to the Authority's Ante-natal and Post-natal Clinics for blood testing under the arrangements set out in detail in the Annual Report for the year 1953 :—

The following results were obtained during the year :—

(i) Cambridge Laboratory.

W.R. & P.P.R.—Negative 1074 (99.91%) Positive 1 (0.09%).

Hb. content—range 5.8 to 14.7 gms. %.

Rh factor—Positive 771 (71.72%) Negative 304 (28.28%).

Antibodies present in 4 (0.37%) negative specimens.

Cord blood from Rh negative patients—

54 (45.76%) Rh positive, 64 (54.24%) Rh negative.

1 Positive to Coombe's test (0.85%).

(ii) Norfolk and Norwich Hospital Laboratory.

W.R.—Negative 1049, Positive 1.

G.C. Fixation—Negative 22, Positive Nil.

Vaginal smears negative to Gonococcus 16.

Cord blood—Coombe's test—Positive 4, Negative 1.

As a result of these findings, 3 mothers with antibodies present were admitted for institutional confinement; all infants were born alive.

Two mothers with antibodies present were confined on the District, both resulting in full-term healthy infants.

The mother with the positive W.R. test received treatment and gave birth to a live infant.

Since the investigation for the Rh factor in the blood of expectant mothers commenced in October, 1947, a total of 9946 investigations have been made. 7494 (75.35 %) were Rh positive and 2452 (24.65%) Rh negative, and since the investigation for the estimation of hæmoglobin commenced in October, 1949, a total of 6828 investigations have been made, the results ranging from 5.8 gms.% to 17.3 gms.%.

ROUTINE CHEST X-RAY EXAMINATION OF ANTE-NATAL PATIENTS.

Facilities have been available at the Chest Clinic at the Isolation Hospital for the routine chest X-ray examination of Ante-natal patients. 410 patients were referred from the Local Authority's Ante-natal Clinics; 280 (68.29%) attended and 130 (31.71%) defaulted. 274 (97.86%) were reported to be normal and 6 (2.14%) because of lesions attended the Chest Clinic.

CARE OF UNMARRIED MOTHERS.

The Council does not maintain any institution for the accommodation of mothers and children. On the recommendation of the Health Committee one mother was admitted post-natally to a Mother and Baby Home. The Health Committee was prepared to accept financial responsibility for the care and maintenance of this mother in the Mother and Baby Home but the necessary payments were provided from other sources. In another case the Health Committee provided pocket money for a mother, for whom arrangements for the admission to a Mother and Baby Home had been made by the Norwich Deanery Moral Welfare Committee.

The Moral Welfare Worker of the Norwich Deanery Moral Welfare Committee looks after the general and moral welfare of unmarried mothers who seek her aid. The Committee provides a shelter at 2, Heigham Grove, Norwich, with accommodation for 6 beds and 2 cots, to which their babies are admitted. The Norwich City Council increased their grant to this Committee from £75 to £100 from the 1st April. Whilst resident at 2, Heigham Grove, during pregnancy, the girls attend the Maternity Clinic at 4, Earlham Road for routine ante-natal supervision, including blood testing, and 32 attended during the year.

Eighty-six girls who normally reside in the city were helped during the year; of these 18 were admitted to the shelter at 2, Heigham Grove, 7 were sent to other Homes, 2 were assisted and advised in securing affiliation payments, 2 were helped to secure grants towards the maintenance of their children, 10 were given friendly after-care and the Moral Welfare Worker acted as

intermediary for the payments of grants obtained previously, 2 were helped to obtain work, 3 were found foster mothers for their children, 16 were given help and advice of various kinds, including gifts of clothing, baby clothing, prams, etc., 12 were put in touch with Adoption Societies and helped through the formalities required, 1 was found lodgings, 2 have their affiliation payments made weekly through the Committee's Worker, 2 were passed on to another Local Authority or Agency, 9 were new cases at the end of the year and the exact form of help needed had not been determined.

Most of the mothers have no idea of how to apply for milk books, maternity benefit or grant, family allowances, affiliation orders, etc., or how to proceed with application, etc., for adoptions. These matters and the general arrangements made for the girls necessitate a good deal of correspondence, visiting and interviewing, and during the year 137 visits were paid, nearly 400 received and approximately 900 letters written. Closest touch is kept with the Health Visitors in all cases.

MOTHERCRAFT TEACHING AND RELAXATION EXERCISES.

In May a discussion took place between the Consultant Obstetricians and the County and County Borough Medical Officers of Health as a result of which it was decided to draw the attention of suitable mothers attending the hospital ante-natal clinics to the fact that mothercraft teaching and relaxation classes are available in both the city and county.

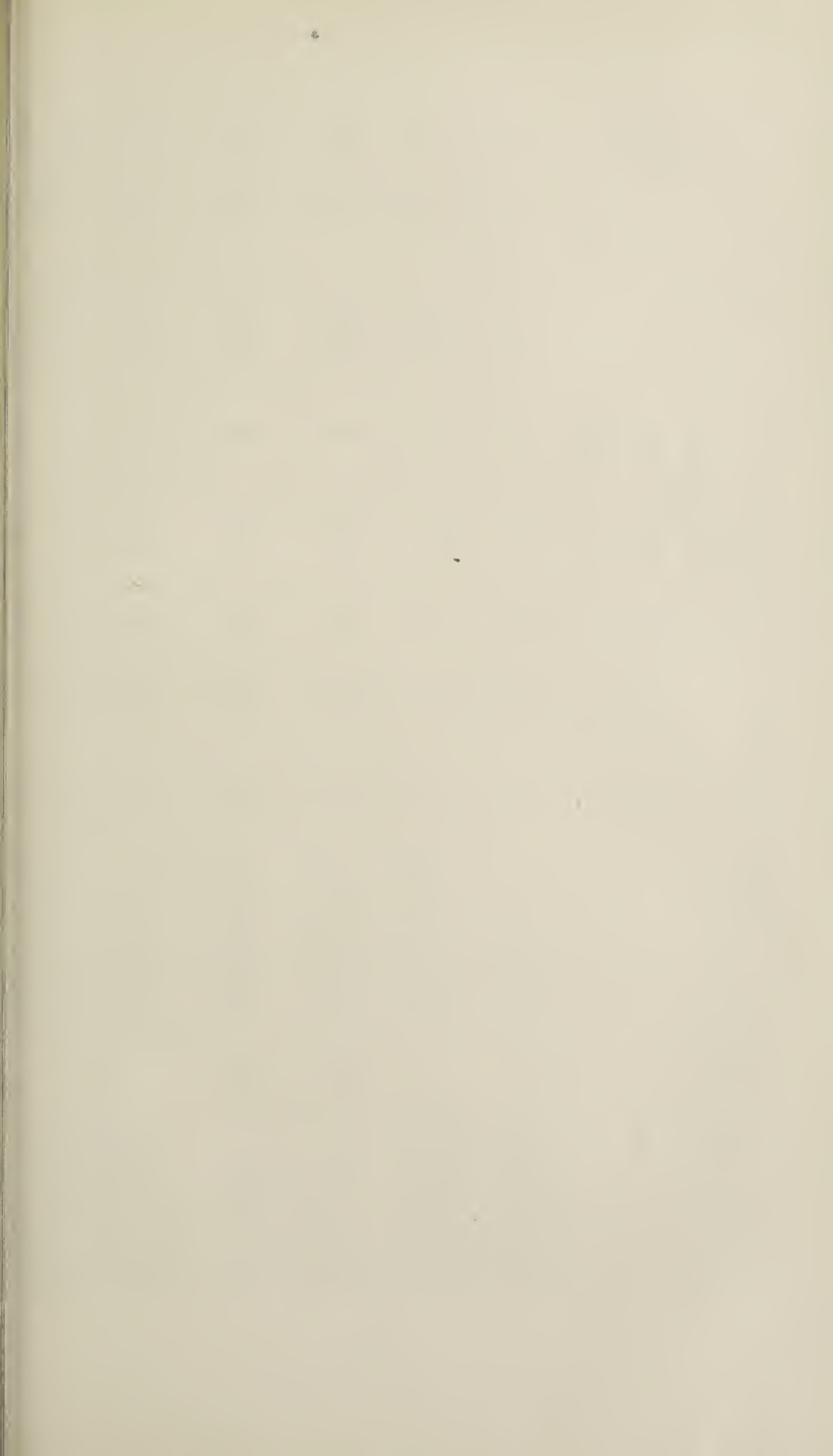
The Mothercraft classes have been much appreciated. The classes continued to be held at 4, Earlham Road, on the 2nd and 4th Thursdays in each month until September; after this date they were held every Friday afternoon. The course consists of 6 lectures covering a variety of subjects relating to mothercraft and child care.

Until September the classes for ante-natal exercises and training in relaxation continued to be given at 4, Earlham Road, on the 1st and 3rd Thursdays in each month. Since that date, in order to accommodate the increased number of mothers availing themselves of this service, these classes were held weekly on Thursday. Arrangements have been made for some of the domiciliary midwives to give this instruction at the district ante-natal clinics.

STERILISED MATERNITY OUTFITS.

Sterilised Maternity Outfits have been issued from the Authority's Ante-natal Clinics free of charge to domiciliary midwifery cases. Distribution has been as under :—

1951—890; 1952—1057; 1953—1008; 1954—1019; 1955—991.



INFANT WELFARE CENTRES, 1955.

Name of Centre.	When held.	No. of Sessions.	No. of New Cases Attended.	Total No. of Cases Attended.	Total Attendants seen by Medical Officers.		No. of Attendances.		Average Attendance per Case.
					Total.	Average per Session.	Total.	Average per Session.	
LAKENHAM. Jubilee Playground, Long John Hill.	(a) Monday p.m. *Friday p.m.	48	95	445	972	22	2691	56	9.89
		51	46		—	—	1711	34	
ROSEBURY ROAD. Methodist Church, Rosebery Road.	Monday p.m. *Thursday p.m.	48	99	502	893	19	2403	50	8.84
		51	54		—	—	2086	40	
EATON. Jessopp Road, Congregational Church.	(b) Monday p.m. Tuesday p.m. (c) Thursday a.m.	48	101	1116	704	15	3234	67	
		51	109		926	18	3826	75	8.31
		52	75		646	13	2218	43	
ST. BARNABAS. St. Barnabas Parish Hall, Russell Street.	Tuesday p.m. *Wednesday a.m.	51	104	391	1036	20	3548	70	11.67
		52	12		—	—	1016	20	
EARLHAM. Larkman Lane Infants' School. Clarkson Road.	*Tuesday a.m. Friday p.m.	51	68	597	—	—	1645	32	7.75
		51	136		1141	22	2979	58	
WEST EARLHAM. West Earham Community Centre.	*Wednesday a.m. Wednesday p.m.	52	13	496	—	—	1165	22	7.99
		52	82		766	15	2801	54	

THORPE. The Stuart School, Telegraph Lane	Wednesday p.m.	52	116	339	989	19	3048	59	8.99
CALVERT STREET. Calvert Street Methodist Church.	(d) Thursday a.m.	52	30	96	174	16	1284	25	13.38
TUCKSWOOD. Tuckswood Community Centre.	Thursday p.m.	52	151	476	1409	27	3862	74	8.11
MILE CROSS. Baptist Church Hall, Mile Cross Road.	Thursday p.m.	43	75	290	738	17	2626	61	9.06
CATTON GROVE. Catton Grove Infants' School, Middleton Close.	Thursday p.m. Friday a.m.	9 51	13 59	215	140 683	16 13	494 1723	55 34	10 31
MARINERS LANE. The Mission Hall, Sherbourne Place.	(e) Friday p.m.	51	59	148	434	17	1723	34	11.64
Grand Totals	...	968	1488	5111	11646	18.23	46033	47.55	9.00

* Health Visitors only in attendance.

(a) Medical Officer attended on 45 occasions.

(b) Medical Officer attended on 46 occasions.

N.B.—Mile Cross transferred to Catton Grove after 27.10.55.

(c) Medical Officer attended on 51 occasions.

(d) Medical Officer attended on 11 occasions.

(e) Medical Officer attended on 26 occasions.

INFANT WELFARE CENTRES.

Infant Welfare Centres are provided as shown in the table on pages 48 and 49: The table also shows the number of attendances, etc., during 1955.

At the end of the year there were 11 Centres which were open on 19 sessions each week.

Attendances at the Infant Welfare Centres have been as follows :—

	1954	1955
By children under 1 year	21,175	20,785
By children between 1 and 2 years	10,468	9,998
By children between 2 and 5 years	16,811	15,250
	<hr/> 48,454 <hr/>	<hr/> 46,033 <hr/>
Total number of individual children who attended during the year	5,846	5,111
Average attendance of children per session at all the Centres	50.0	47.55
Children seen by the Medical Officers in charge	13,280	11,646
Average number of children seen by the Medical Officers per session	20.6	18.23

Children found at the Infant Welfare Centres to need treatment are referred to their own General Practitioner.

SUPPLY OF WELFARE FOODS.

Since July, 1954, when the Local Food Office closed, the Council has been entirely responsible and Welfare Foods have been distributed from Churchman House on 7 half-days each week and from the Infant Welfare Centres. In addition other foods and medicaments are supplied where the welfare of expectant or nursing mothers or young children so require. A charge is made for the latter foods in accordance with the Council's scale.

Owing to the continuance of the National Milk Scheme it has not been necessary for several years to issue supplementary supplies of liquid milk to any mothers or children through the Council's scheme. National Dried Milk, however, has been issued on behalf of the Ministry of Food and other proprietary Dried Milks have been issued on the recommendations of the Medical Officers. Charges were made in appropriate cases. The following tables show the quantities of foods, etc., issued during 1954 and 1955.

(i) *Dried Milks.*

	Free.	1954 Full Cost.	Total.	Free.	1955 Full Cost.	Total.
National Dried Milk (tins) (Equivalent to 7 pints of Milk)	1417	66969	68386	2755	85008	87763
Other Dried Milk (packets) (Equivalent to 4¼ pints of Milk)	—	894	894	13	716	729
Totals ...	1417	67863	69280	2768	85724	88492

(ii) *Foods, Etc.*

(a) Supplied by the Local Health Authority :—

	1954	1955
Virol (14 oz. cartons)	1080	514
Malt and Oil (1 lb. cartons)	1362	712
Lactagol (5½ oz. tins) (8 oz. cartons)	880 296	— 752
Virolax (7 oz. cartons)	761	497
Dextrosol (1 lb. cartons)	1646	972
Maltoline with Iron (8 oz. tins)	—	161

(b) Supplied by the Ministry of Food :—

Orange Juice (bottles)	56209	86511
Cod Liver Oil (bottles)	14677	16749
Vitamin Tablets (packets)	3648	6774

Iron Tablets were issued from the Infant Welfare Centres and Calcium, Iron and Vitamin Tablets from the Ante-natal Clinics.

In addition 918 cartons of Virol, 1152 lbs. of Malt and Oil, 20 cartons of Virolax, 954 bottles of Parrish's Food, 343 lbs. Dextrosol and 63 tins of Maltoline with Iron were distributed to school children on behalf of the Education Committee during the year.

DENTAL TREATMENT.

The Principal School Dental Officer reports :—

(a) *Arrangements for the Dental Treatment of Children under School Age and Expectant and Nursing Mothers.*

Children under school age are referred to the Dental Clinic either from the Infant Welfare Centres or from a private practitioner. In every case a certificate is required from the Medical Officer before a general anæsthetic is given. A form is available at the Dental Clinic for issue to the general practitioners for certification.

These children are inspected on Saturdays from 9.15 a.m. to 10 a.m. and urgent treatment is carried out at the same time. Appointments for conservative treatment are also given if necessary.

Expectant and Nursing Mothers are referred from the Maternity Clinics and private practitioners, and the same rule applies with regard to certificates for fitness to take a general anæsthetic.

These patients are inspected on Saturdays from 11 a.m. when appointments are given. Conservative treatment is carried out during the week, and extractions under a general anæsthetic on Saturdays at 10 a.m.

(b) *Numbers provided with dental care.*

	Examined	Needing Treatment	Treated	Made Dentally Fi
Expectant and Nursing mothers	170	170	153	107
Children under five	345	338	338	—

(c) *Forms of dental treatment provided.*

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radiographs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing mothers	49	356	—	—	525	57	40	45	4
Children under five	—	157	230	—	594	345	—	—	—

CARE OF PREMATURE INFANTS.

No change in the arrangements for keeping under observation premature infants was made during the year. A good Ambulance Service is available but an ambulance with special equipment for the transport of these cases has not been provided; instead a complete set of equipment is kept in readiness at the Maternity Clinic,

4, Earlham Road, for use as required during transport by ambulance; such equipment to be returned for cleaning after use. 2 additional sets of equipment are kept at 4, Earlham Road.

Every encouragement is given, weight and vitality permitting, for premature infants to be nursed at home by a relay of Domiciliary staff. Results have proved encouraging.

The services of a Consultant Pædiatrician are available to the Domiciliary Midwifery Service at the request of the General Practitioner Obstetrician. In cases where it is necessary for the premature infants to be transferred to hospital by ambulance a member of the Domiciliary Midwifery staff accompanies the case in transit.

240 (including 131 county) babies born in the city during the year weighed at birth $5\frac{1}{2}$ lbs. or less. A further 17 city babies were born outside Norwich. Of the 109 city premature babies, 47 were born at home, and of these 3 were stillborn and 1 died within 28 days. 7 were transferred to hospital, where 1 died within 28 days.

Of the 62 city premature babies born in hospital, 7 were stillborn, 2 died within 24 hours and a further 3 within 28 days.

Of the 17 city premature babies born outside the city, 2 were stillborn, and 1 died within 28 days.

NURSERY PROVISION.

No day nurseries, residential nurseries, registered daily guardians or creches at Infant Welfare Centres are provided.

THE NURSERIES AND CHILD MINDERS REGULATION ACT, 1948.

No certificate was issued for a child minder under this Act.

CONSULTANT CLINICS.

Defective Vision. Children seen at the Infant Welfare Centres suspected to be suffering from defective vision are referred to the School Eye Clinics at Churchman House. 23 children were referred; glasses were recommended for 11.

Any of these children requiring Orthoptic treatment are referred to the Orthoptist at the Norfolk and Norwich Hospital.

Orthopædic Defects. Children seen at the Infant Welfare Centres suspected to be suffering from orthopædic defects are referred, with the approval of the General Practitioner, to the Orthopædic Clinics at the Jenny Lind Hospital.

Speech Clinics. Children under 5 years of age who do not attend any school are given speech training by the part-time Speech

Therapist at Churchman House on the recommendation of the Assistant Medical Officers.

Ringworm. 1 child under school age suffering from ringworm of the scalp came to my notice during the year, and was declared cured later in the year.

MIDWIFERY SERVICES.

(Section 23).

The booking arrangements for institutions are mentioned on page 43.

Transport for midwives and their equipment was provided by the Ambulance Service on 188 occasions.

(a) MIDWIVES.

The establishment consists of a Non-medical Supervisor of Midwives, a Resident Assistant Non-medical Supervisor of Midwives and 16 District Midwives. With regard to the District Midwives 15 were actually employed for the whole of the year and a holiday midwife for 3 months.

On the 31st December there were 10 midwives at the West Norwich Hospital and 14 at the Norfolk and Norwich Hospital. In addition 2 midwives were in private practice (1 domiciliary and 1 in a private nursing home).

The total number of midwives practising in the city on the 31st December was 41.

All the Domiciliary Midwives are trained in the administration of gas/air analgesia and each is provided with her own Minnitt gas/air apparatus. Transport of the apparatus is by the Midwife's cycle or car for the use of which she is granted an allowance, or by the Ambulance Service. 6 of the domiciliary midwives are approved Teaching Midwives.

During the year 10 pupils completed their training and passed the Part II examination of the Central Midwives' Board.

The Non-medical Supervisor of Midwives and her assistant and the Domiciliary Midwives attend Refresher Courses at intervals of 5 years, their expenses being defrayed by the Local Authority. Under these arrangements 2 Domiciliary Midwives attended Refresher Courses during the year. Arrangements were made for the Non-medical Supervisor of Midwives and her Assistant and some of the Domiciliary Midwives to attend Study Days, which were arranged by the Norfolk County Council.

(b) MIDWIFERY SERVICE.

(i) Domiciliary.

The domiciliary service continued to be controlled from 4, Earlham Road, throughout the year. 899 confinements (excluding 33 cases of miscarriage) were attended (926 in 1954). Doctors were engaged in 684 cases. In addition to attending these 899 confinements the domiciliary midwives carried out ante-natal supervision, making a total of 11,857 ante-natal visits to patients' own homes. Nursing visits after labour numbered 16,987. In addition the midwives attended for varying periods 573 patients who had been discharged before the expiration of the lying-in period, i.e. 14 days, 359 visits to 77 patients from the Norfolk and Norwich Hospital, 490 visits to 225 patients from West Norwich Hospital, 555 visits to 271 patients from Drayton Hall Maternity Home. There were 12 stillbirths on the district, representing 1.33% of the cases attended. Doctors were engaged in 7 of these cases.

12 cases of notifiable Puerperal Pyrexia occurred, 1 of whom was transferred to hospital. All the cases were fully investigated.

(ii) Institutional.

(a) Norfolk and Norwich Hospital.

This hospital has a maternity block which admits mostly abnormal or suspected abnormal cases. 653 mothers from the city and county of Norfolk were confined during the year. There were 50 stillbirths and 21 children died within 10 days of birth. 24 cases of notifiable Puerperal Pyrexia occurred. There was no maternal death.

Ante-natal clinics are also held twice each week at the Norfolk and Norwich Hospital, at which city and county persons booked for admission to the Maternity Wards at the local institutions attend. The Secretary of the hospital states that 1414 women made 2897 attendances at these clinics during the year, but he was unable to give separately the numbers in respect of city and county persons. In addition, 47 mothers each made one post-natal attendance. 1450 women made 2990 attendances in 1954.

(b) West Norwich Hospital.

662 mothers who normally reside in the city and county were confined in this institution. There were 18 stillbirths, 7 children died within 10 days of birth and there were 17 cases of notifiable Puerperal Pyrexia. There was no maternal death.

(c) Isolation Hospital.

3 women were confined in the Isolation Hospital and gave birth to live children.

(d) Drayton Hall.

This Maternity Home is situated in the area of the County of Norfolk, and many mothers, who normally reside the city are admitted for their confinements.

(c) STATISTICAL.

(i) Still-births.

83 stillbirths (1 of which occurred in 1954) were registered in the city, including 51 county cases; 2 city and 3 county children were illegitimate.

12 were registered in connection with the Council's Domiciliary Midwifery Service, 18 (9 county) at the West Norwich Hospital, 51 (40 county) at the Norfolk and Hospital Hospital, and 2 (county) at the Plantation Nursing Home.

The following table shows the conditions associated with stillbirths, which were registered in the city during the year, excluding the county cases :—

Toxæmia of Pregnancy	...	...	...	2
Toxic accidental hæmorrhage	...	...	...	1
Accidental hæmorrhage	...	...	...	2
Cord round neck	...	...	...	2
Prolapse of cord	...	...	...	1
Shoulder presentation with prolapsed cord	...	...	...	1
Placental insufficiency	...	...	...	2
Infarcted placenta	...	...	...	1
Anencephalus	...	...	...	3
Gross multiple abnormalities of fœtus	...	...	...	2
Hydrocephalus	...	...	...	1
Post maturity	...	...	...	4
Asphyxia during delivery of breech	...	...	...	1
(?)Cerebral hæmorrhage	...	...	...	1
Cause unknown	...	...	...	8
				<hr/> 32

(ii) Maternal Mortality.

No death associated with Pregnancy, Childbirth or Abortion occurred.

(d) CONSULTANT FACILITIES.

(i) Obstetrical Emergencies.

General Practitioners can consult any member of a panel of three Specialists in difficult maternity cases. Midwives in a case of obstetric emergency may summon a Consultant Obstetrician

direct and need not await the arrival of a General Practitioner before doing so. The Regional Hospital Board is responsible for the fees.

(ii) Ante-natal Care.

The examination, when necessary, of patients from the Municipal Ante-natal Clinics by the Specialists at the Norfolk and Norwich Hospital continued throughout the year. 35 cases were referred.

(iii) Post-natal Care.

The arrangements made by which patients attending the Municipal Post-natal Clinics can be examined by Specialists at the Norfolk and Norwich Hospital continued. 6 cases were referred during the year.

(e) CONTRACEPTIVE CLINIC.

The Council continued to make an annual subscription of £50 to the voluntary clinic at Ber Street.

(f) MATERNITY AND NURSING HOMES.

Before applicants are registered new homes are inspected by a Medical Officer of the Public Health Department to ensure that the arrangements comply with the byelaws and the standards laid down by the Health Committee. The arrangements for protection against fire also are inspected. All nursing and maternity homes are inspected periodically by a Medical Officer. At the end of the year 4 persons were registered in respect of nursing homes (non-maternity) and one in respect of a mixed home.

HEALTH VISITING.

(Section 24).

Under the National Health Service Act, 1946, the authorised number of Health Visitors, who also act as School Nurses, is 17, excluding the Tuberculosis Visitors. The actual number of Health Visitors employed on the 31st December was 15, excluding 2 Tuberculosis Visitors. In addition 1 School Nurse was employed wholtime and another Nurse part-time.

Owing to the difficulty in obtaining Health Visitors the Council decided to assist financially suitable persons to train as Health Visitors by paying three-quarters of the minimum salary of a Health Visitor during the period of training in return for which the Student undertakes to give 2 years service with the Council. One Student was undergoing training at the end of the year.

Visits were made as under by Health Visitors during the year :—

	1954.	1955.
Total number of visits to premises ...	21203	18612
Visits to Expectant Mothers ...	583	441
Visits to children under 1 year—		
First visits	1884	1602
Total visits	8880	7620
Visits to children between 1 and 5 years	13360	10749

Arrangements are made for the Health Visitors to attend Refresher Courses approximately every 5 years. 3 attended in 1955. Some of the Health Visitors attended Study Days which were arranged by the Norfolk County Council in March and October.

With the co-operation of the Pædiatrician at the Jenny Lind Hospital, arrangements were made for the Health Visitors to tour the wards at that hospital on a rota basis. Some of the Health Visitors also attended the Council's ante-natal clinics; others attended the Child Guidance Clinics.

HOME NURSING.

(Section 25).

The authorised number of District Nurses under the National Health Service Act, 1946, is 1 Superintendent and 20 full-time nurses, but the Health Committee has authorised the appointment only of 1 Superintendent and 17 full-time nurses.

The Male Nurse, who was undergoing training organised by the Queen's Institute of District Nursing at the end of 1954, completed his training and was successful in the Queen's Roll Examination. Another Nurse commenced training in October and was still attending the Training School at the end of the year.

The employment of a Bathing Attendant for aged, infirm and disabled cases, where actual nursing care is needed, fully justified itself.

At the end of the year, 1 Superintendent, 11 full-time and 9 part-time nurses were employed, including the nurse who was undergoing the course of training.

The types of cases attended were as follows :—

	Cases.	Visits.
Medical	1367	45679
Surgical	193	8746
Infectious Diseases	64	562
Tuberculosis	48	1824
Maternal Complications	67	694
Others	140	776
	<hr/> 1879	<hr/> 58281

In 1954, 1834 patients were attended, to whom 62243 visits were made.

The Health Committee accepted financial responsibility for the attendance of one of the District Nurses at a non-residential refresher course, which was held in London in the Spring.

Arrangements were made for some of the District Nurses to attend Study Days which were arranged by the Norfolk County Council.

Lectures were arranged for members of the District Nursing Staff twice a month during the Winter months.

Through the co-operation of the Radiotherapist at the Norfolk and Norwich Hospital District Nurses commenced attendance at the Radiotherapy Clinic in October, 1955.

INJECTION WORK.

During the year 17,160 visits were made by nurses for the purpose of giving injections—insulin, streptomycin, neptal, etc., and the system of central sterilisation of syringes was instituted. This provides for a daily supply of sterile syringes for the use of the nurses on injection work and has proved a valuable time saver.

CHILDREN.

At present the Children's Hospital appears to be able to admit most cases of serious illness occurring in children, and there have not been many requests for the nursing of seriously ill children in the home. In all 81 children under 5 years of age have been cared for and these have largely been cases requiring nursing supervision after early discharge from hospital. A total of 578 visits were made.

NIGHT NURSING SERVICE.

There continues to be a steady demand for night nursing services. In all, 143 night visits were made. These cases all require actual nursing and do not include those who had the services of a night attendant.

VACCINATION AND IMMUNISATION.

(Section 26).

For the purposes of comparison details of the primary vaccinations done during the years 1951—1955 are given below :—

Year	No. of Births	Primary Vaccinations				Percentage of children vaccinated under 1 year of age
		Under 1 year (Age at date of vaccination)	1-5 years	5-15 years	Over 15 years	
1951	1910	346	81	45	202	18.1
1952	1832	445	78	32	128	24.3
1953	1843	431	68	52	118	23.3
1954	1796	467	55	32	101	26.0
1955	1687	546	62	29	71	32.4

DIPHTHERIA IMMUNISATION.

During the year 1612 new cases were immunised against Diphtheria, and 1402 children received re-inforcing doses. 778 of the new cases were immunised by General Practitioners. The following table shows the age groups of the children dealt with :—

	AGE at date of final injection or of reinforcing injection.			Total
	Under 1	1—4	5—14	
Number of children who completed a full course of primary immunisation ...	635	729	248	1612
Number of children who received secondary (reinforcing) injection ...	—	263	1139	1402

At the end of the year 4300 children or approximately 47.7% of the population under 5 years of age, had been immunised. 13259 children between the ages of 5 and 15 years had also been immunised or approximately 72.8% of the children attending school.

From 1935, the year in which Diphtheria Immunisation clinics commenced in Norwich, 31,753 children have been immunised.

WHOOPING COUGH INOCULATION.

Whooping Cough inoculation, when asked for, is carried out by the staff of the Public Health Department and by General Practitioners in the city. During the year 406 children, all under 5 years of age, were immunised at the Public Health Department Clinics.

AMBULANCE SERVICE

(Section 27)

At the end of the year 6 ambulances, 2 multi-seater vehicles and 4 sitting-case cars were in use. During the year one of the sitting-case cars was replaced by a new car with a diesel engine.

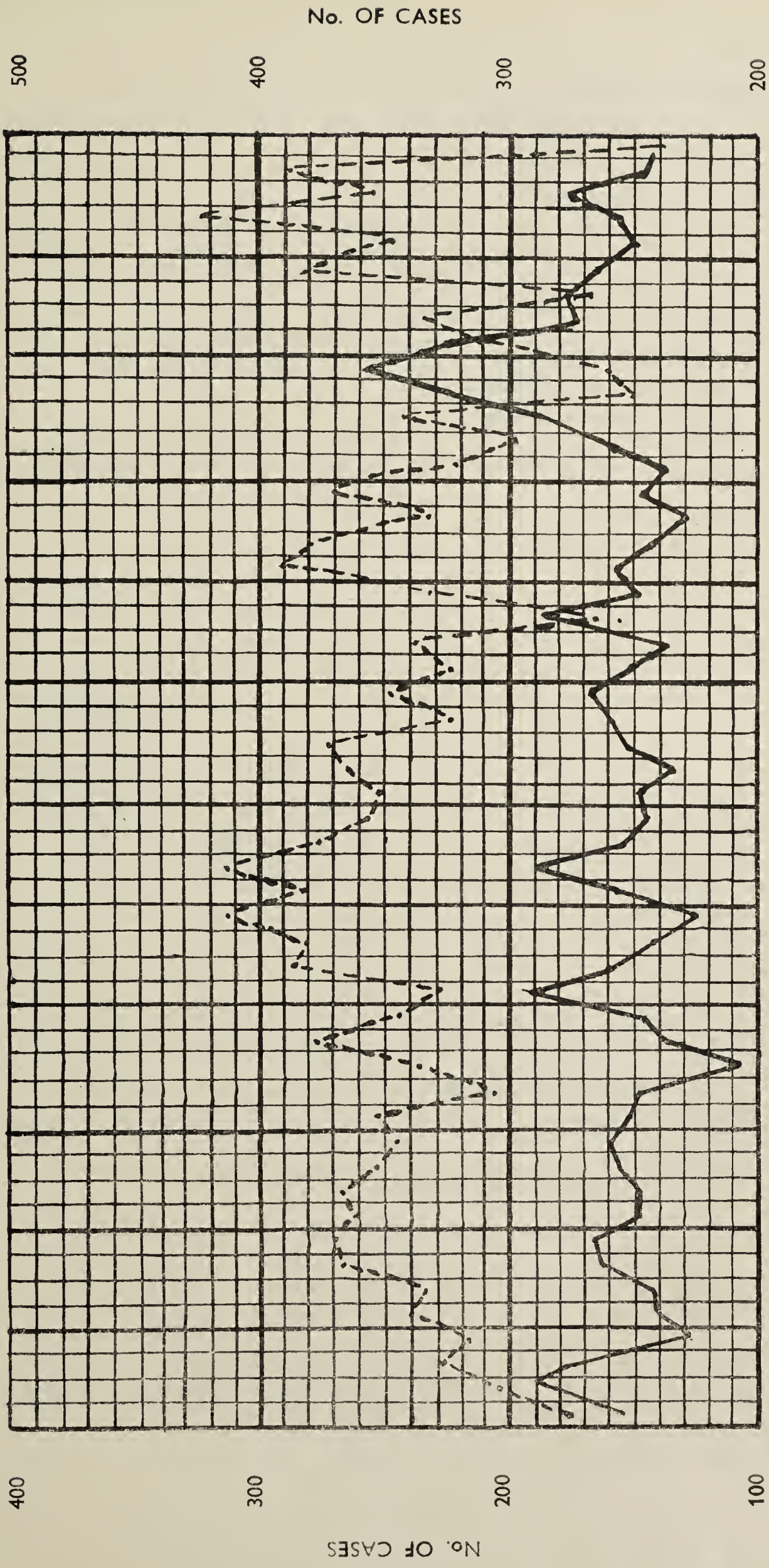
95 journeys of 100 miles or more from Norwich were made. Firemen were used on 73 occasions to supplement the Ambulance Staff.

AMBULANCE SERVICE

By Sitting
Case Cars

GRAPH SHOWING WEEKLY NUMBER OF CASES CARRIED

By
Ambulances



No. OF CASES

Cases carried by Ambulances ——— Cases carried by Sitting Case Cars ———

Cases carried.

The following tables show the number of cases dealt with during the year :—

(i) Classification.

	Stretcher Cases.		Sitting Cases.		Total.	
	1955	1954	1955	1954	1955	1954
Accidents and sudden illnesses	899	871	874	855	1773	1726
Transport to and from hospitals and other places (not included elsewhere) ...	4917	4569	22055	21964	26972	26533
Maternity Cases ...	114	132	473	551	587	683
Mental Cases ...	62	74	191	179	253	253
Corpses (to Mortuaries)	82	90	—	—	82	90
	<u>6074</u>	<u>5736</u>	<u>23593</u>	<u>23549</u>	<u>29667</u>	<u>29285</u>

(ii) No. of Cases conveyed :—

		By Local Services.		Cases conveyed by other Local Authorities under Mutual Assistance Schemes.	
		1955.	1954.	1955.	1954.
By Ambulance ...		8248	8082		
By Cars ...		17838	17524		
		<u>26086</u>	<u>25606</u>	<u>3581</u>	<u>3679</u>

In addition the defectives were conveyed to and from the Occupation Centre daily (1401 journeys 1955, 990 journeys 1954).

Midwives used sitting-case cars for the conveyance of the Gas/Air Apparatus on 189 occasions 1955, and 267 occasions 1954.

(iii) No. of journeys made :—

		Journeys.		Mileage.	
		1955.	1954.	1955.	1954.
By Ambulance ...		4880	4787	76065	75017
By Cars ...		5149	5591	76687	80669
		<u>10029</u>	<u>10378</u>	<u>152752</u>	<u>155686</u>

No. of accident and other emergency journeys included above :—

				1955.	1954.
Ambulance	...	...	...	1353	1205
Cars	...	...	...	211	256
				<hr/>	<hr/>
				1564	1461
				<hr/>	<hr/>

				1955.	1954.
(iv.)	<i>No. of occasions on which patients were conveyed by rail</i>			36	34

PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

(Section 28)

TUBERCULOSIS.

REHABILITATION.

The Health Committee arranges for the rehabilitation of cases of Tuberculosis, but did not undertake financial responsibility for any case during the year.

REHOUSING OF TUBERCULOUS PERSONS AND FAMILIES.

The Chest Physician makes a recommendation to the Medical Officer of Health for the rehousing of persons who are notified cases of pulmonary tuberculosis and whose housing conditions are considered by him to have a detrimental effect on the patient's health, or to be conducive to the spread of the disease to other members of the household. Recommendations are made in the main for newly discovered cases of the disease or in respect of established cases who show signs and symptoms of a regression.

The Housing Committee decided at their meeting held on the 5th March, 1952, to increase from 2 to 5 the number of houses per month allotted to the rehousing of tuberculous persons whose names are on the Tuberculosis rehousing list, thereby affirming the value of suitable housing conditions in the control and treatment of the disease. The Housing Manager has been a sympathetic and valuable ally in the fight against tuberculosis in the city.

The table shows the trend of demand and rehousing of tuberculous persons and their families over the past 11 years.

At the time of writing this report 6 of the 17 cases on the list remain to be rehoused.

Instead of being thankful for an offer of rehousing in better accommodation and environment, some patients insist on waiting for their choice of house and district. They are always urged to

accept the offer of the Housing Manager with the possibility of an exchange of house at a later date.

A person with symptoms, signs and a chest x-ray examination suspicious of Tuberculosis but not sufficient for the Chest Physician to notify immediately as a definite and established case presents some difficulty. In such instances the Chest Physician is of the opinion that rehousing would lead to an improvement in the condition but he is unable to advise such action as the case has not been notified as one of tuberculosis. If arrangements could be made to rehouse this type of patient (the numbers would be very small each year) it would be sound preventive medicine both from the point of view of the individual and also the community.

Table showing number of Tuberculous Households rehoused over the past 11 years.

Number of families on Tuberculosis Housing List at end of 1944—14.

			Additions.	Rehoused by Norwich Corporation.	Removed from List for various reasons.
1945	...	...	26	11	5
1946	...	...	51	14	8
1947	...	...	17	22	20
1948	...	...	56	39	5
1949	...	...	36	31	8
1950	...	...	38	25	7
1951	...	...	34	30	6
1952	...	...	31	33	19
1953	...	...	37	39	7
1954	...	...	27	29	1
1955	...	...	34	18	4

Number of families on Tuberculosis Housing List at 31st December, 1955—17.

VISITATION.

2 Tuberculosis Visitors are employed. These officers carry out the visitation of the Tuberculous and bring to the notice of the Chest Physician the special needs of any notified person. They also attend with the Chest Physician at the Tuberculosis Clinic. These officers made visits as under during the year :—

	First Visits	Re- Visits
Tuberculous families or households ...	73	2470
Patients ...	63	1725
Home contacts ...	174	2863

In addition 547 visits were made for other purposes.

The Health Visitors also made 86 visits to Tuberculous households and the District Nurses attended 48 cases, making 1824 visits.

ASSISTANCE.

The arrangements mentioned in my Annual Report for 1953 for assisting the Tuberculous continued. 31,061 pints of milk were supplied.

REPORT OF THE CHEST PHYSICIAN.

Dr. P. H. Sutton, Consultant Chest Physician, writes : The City Council has a particular responsibility for the prevention of tuberculosis and the after-care and rehabilitation of persons suffering from the disease. With the increased success of modern methods of treatment, rehabilitation has become more important for more patients are returned fit for work. It is in this part of the service that there is therefore most need for improvement.

New Cases.

The use of more intensive case finding methods has slowed the fall in the number of new notifications. The changes are illustrated by the figures for the past year.

			1954.	1955.
Mass Radiography Unit	...	...	9	22
General Practitioners	...	...	47	47
Contacts	...	...	12	11
Other	...	...	4	8
Transfer in	...	...	16	18
			<hr/> 88	<hr/> 106

The Mass Radiography Unit paid a long visit to the city, which accounts for the increase in cases found by this means in the past year.

The age and sex distribution shows a preponderance of males especially in the older age groups, a characteristic noted in previous years.

Deaths (Respiratory Tuberculosis).

Deaths from respiratory tuberculosis during the year numbered 14, of whom 3 were notified only after death. Of the 11 cases known to the clinic, 5 were over 60 years of age at death and all except 2 were severe cases of long standing.

Contact Examination.

492 new contacts were examined during the year, in addition to the re-examination of many others. 11 cases of active tuberculosis were found.

During the year a teacher was found to have active tuberculosis, and the school, a primary school, was investigated. The results of the investigation were very reassuring in that no cases were traced to the teacher. Even more important was the fact

that it was possible to point to the probable source of the infection in the case of each child who was found to be a tuberculin reactor. 6 were found to be positive reactors out of 249 children between the ages of 5—7+. One of these children had been vaccinated with B.C.G. Of the remaining five, two were already known to be positive reactors, having been investigated previously as contacts, two others were to have been investigated as contacts of a recent case of tuberculosis if the school tests had not anticipated their examination, and in the remaining child, it was possible to surmise the source from past clinic records. None of these children required any treatment.

B.C.G. Vaccination.

110 tuberculin negative contacts were vaccinated during the year, and the B.C.G. vaccination of 13 year old children has continued in the schools. The benefit of this programme should be seen in the next few years as these young people enter industry.

Welfare.

The work of the part-time Welfare Officer appointed by the city has continued. It falls under two main headings, which may be called conveniently welfare and rehabilitation.

Welfare includes clothing, housing requests, advice on income and pensions and those many personal matters which always loom larger to the sick person, and to the unemployed. It also includes as far as possible suitable occupational and diversional therapy which is so important in maintaining a patient's morale during a chronic illness. It will be apparent that much of this work will be of a type more suitably administered and paid for by a voluntary organisation than by a public body, which must necessarily be more rigid in its methods. It is therefore most encouraging that the responsibility for providing suitable equipment, etc., has been taken over by the Friends of Kelling.

Rehabilitation is even more important, implying as it does, the return of the patient to a full working place in the community.

At present something like half the patients, who do not return to their old jobs, are successfully found fresh work. At the time of writing 33 men are fit for work and cannot find it. Most of them have been unemployed for some time. 18 are under 40 and the remainder between 40 and 63 years old. Close co-operation is maintained with the Disablement Resettlement Officer of the Ministry of Labour, and, due to this, there has been some improvement in the outlook of these patients. There remains nevertheless much to be done before it can be considered that the service to the patients is adequate.

A change in the attitude of employers is needed. Instead of the present usually reluctant acceptance of ex-patients for

vacancies, it is hoped to persuade some employers to ask for them whenever they have a vacant job which might be suitable; or in other words, active assistance instead of passive acceptance.

It is not to be expected that employers should co-operate in this way unless the men sent to them are fit and suitable. An organisation is therefore needed which will keep these men under review from the moment they start treatment so that they can have something waiting for them on their return to health. The patient will greatly benefit from the knowledge that his future is being constantly considered.

If a patient does not obtain a job within a few months of becoming fit, he will soon become discouraged and not unnaturally, gradually gets work-shy.

There is therefore needed a local workshop rather on the lines of Remploy where these patients can be re-introduced to work under medical supervision. In such a workshop, patients could be "tried out" until fit for a full day in ordinary industry. Employers could then be assured with much greater certainty that the man is fit for work.

Such a scheme would obviously require the co-operation of Voluntary Helpers, the Ministry of Labour, the City Council, Employers and Trade Unions, besides quite a considerable sum of money. Until it has been started, it cannot be said that the City of Norwich is doing what it should for these patients.

The recent acceptance of responsibility for after-care by the Friends of Kelling with their fine tradition of help for tuberculous patients, is a very encouraging hope for the future. If they succeed in this work of rehabilitation as they have with welfare, they will greatly increase the indebtedness of tuberculous patients to their organisation.

UNSATISFACTORY HOUSEHOLDS.

Unsatisfactory households, sometimes known as "problem families", are supervised by the Health (Unsatisfactory Households) Sub-Committee. The Sub-Committee of 6 members of the Council is attended by the Deputy Medical Officer of Health, the Housing Manager, the Children's Officer, the Area Supervisor of the National Assistance Board, 2 Inspectors of the N.S.P.C.C., 2 Home Advisers, a Health Visitor, and a representative of the Town Clerk's Department. This Sub-Committee meets every other month throughout the year to discuss the families on the current list.

The scheme to rehabilitate these families into useful units in the community commenced in Norwich in 1943 with the appointment of a Home Adviser. She is still working amongst these households and was joined by another Home Adviser in 1950. They are women who are keen and interested in this type of social

service and are prepared for the long uphill struggle needed to get these families to the position where they can live more useful and satisfactory lives. They bear the brunt of the case work and only do practical work in the home when they demonstrate methods in housewifery. They work in co-operation with the Health Visitors and Sanitary Inspectors and maintain liaison with the other representatives of the Sub-Committee. The Home Advisers have a case conference with the Deputy Medical Officer of Health once a week.

These households come to official notice when they are already fairly well established in their unsatisfactory ways. The underlying factor, or cause, is often mismanagement which, in turn, is due in many instances to low mentality of one or both of the parents. As mismanagement is allied to misuse of money and the house rent seems to have a low priority in the list of debts it was considered that the Housing Manager and his staff might be able to assist in the early ascertainment of trouble and he has undertaken to inform the Health Department of any family living in a Council house which falls behind in rent payments.

There were 18 families on the list at the end of the year, 2 were added, and 5 were removed during the year. Altogether 97 families have been dealt with by the Sub-Committee since the scheme began in 1942. The average duration for rehabilitation has been about $3\frac{1}{2}$ years.

The Council decided during the year to rehouse certain families now resident in the ex-service camps at Rackheath and Hethel. Some of these families were homeless in the city at the end of the second world war and went to live in the disused nissen huts on the Rackheath camp site, others, being homeless were consequently offered accommodation at the Hethel Camp by the Welfare Committee and with previous knowledge of some of the families, visits were made to both camps to ascertain whether any of the families fell within the category of an "unsatisfactory household." It was decided with few exceptions that the families should be recorded as unsatisfactory but should be given a period to settle down after rehousing in the city before a final decision be made whether or not they should be added to the list of unsatisfactory households to be dealt with by the Sub-Committee.

DOMICILIARY NURSING.

Cases discharged from hospitals who need home nursing are referred by the Hospital Authorities to the District Nursing Service.

The Council has made arrangements with the British Red Cross Society and the St. John Ambulance Brigade for the loan of sick room equipment. During the year the Health Committee considered the arrangements by which payment to these voluntary organisations for this service are made and decided that for the next 2 years they receive a fixed charge by quarterly instalments and

at the end of each year, for this period, the position should be reviewed and if the organisation has been overpaid or underpaid, according to how much it actually costs the organisation to provide this service, the payment to the organisation during the following 2 years be adjusted accordingly.

During the year 1450 articles were loaned to 888 patients under the scheme.

HEALTH EDUCATION.

Publications, posters and pamphlets issued by appropriate Bodies were purchased and distributed to those attending the Ante-natal Clinics, Infant Welfare Centres, etc.

The Council decided to hold in connection with Norwich Week a Municipal Exhibition in St. Andrew's and Blackfriars' Halls from the 18th to 25th June inclusive. At this Exhibition the activities of the various departments of the Corporation were displayed and the Health Department participated in this.

DOMESTIC HELPS.

(Section 29)

In May the Health Committee considered the wider use of the Domestic Help Service to prevent the temporary break-up of families where children are taken into the Council's care for varying periods when their mothers are admitted to hospital, in either cases of illness or confinements, etc., and decided that for a trial period of 12 months that domestic help be supplied to families where there is a danger of the temporary break-up of the family and that to provide for the service the number of domestic helps employed be increased from the equivalent of 65 to the equivalent of 68 wholetime persons. The approval of the Minister of Health was obtained and 10 families were assisted during the year.

In addition 175 maternity, 10 tuberculosis, 437 cases of chronic sick including aged persons, 43 of ordinary illness and 11 blind persons were assisted during the year, making a total of 686 cases.

People over 65 years of age who received assistance through the Domestic Help Service were :—

(a) Couples	...	...	...	79
(b) Single—Males	...	...	...	71
Females	...	...	...	267
(c) Living with relatives	...	...	...	35
(d) Living in lodgings	...	...	...	1
Total	...	...	...	453*

			Cases
The service was rendered:—			
(a) Intermittently in	...	...	6
(b) Regularly in	...	...	417
(c) For a short term in	...	...	30
Total			453*

25% of these cases were provided with full service and 75% cleaning only.

*The figure 453 includes 10 aged blind persons and 6 aged tuberculous persons.

The number of Domestic Helps employed on the 31st December was 11 full-time and 81 part-time, equivalent to 64 full-time staff. In addition 24 part-time Helps were assisting in the homes of blind persons, the equivalent of 5 wholetime persons.

During the winter period old people, many of whom spend long hours in bed, suffer from lack of warm blankets. With the assistance of voluntary organisations steps are being taken to form a stock which can be issued as required.

Also some old people, as they get older, and usually if living alone, tend to neglect their personal hygiene. Such persons are best referred to the district nursing service before the neglect becomes established. Suitable staffing of the service will be required to meet this need.

MENTAL HEALTH SERVICES.

(Section 51)

(i) ADMINISTRATION.

(a) *Constitution of the Mental Health Sub-Committee.*

The Mental Health Sub-Committee consists of the following members:—

<i>Ald.</i> R. P. BRAUND	<i>Coun.</i> MRS. R. E. HARDY, J.P.
(Chairman).	„ MRS. J. M. KEEFE
<i>Coun.</i> H. ALLEN, J.P.	„ E. PRITCHARD
„ MRS. B. C. DAVIES	
„ MRS. E. M. GOSLING	

The Committee meets on the third Tuesday in alternate months when summoned.

(b) *Staff.*

The Medical Practitioners who are approved by the Local Health Authority for the purpose of giving medical service required in connection with the presentation of petitions under the Mental Deficiency Act, 1913, continued from the previous year.

Mr. P. W. Neal, the Senior Duly Authorised Officer, passed away on 21st December, 1955, after a long illness. He had been attached to the staff of the Board of Guardians and the Council for almost 35 years. The vacancy caused by his decease had not been filled at the end of the year. Owing to the prolonged indisposition of Mr. Neal, Mr. R. Thirkettle was appointed temporarily as Duly Authorised Officer for relief duties. Mr. Thirkettle was still acting in this capacity at the end of the year.

The staff at the Occupation Centre consists of 2 Females and 1 Male. In May, 1955, the designations of these Officers were changed from Occupation Centre Supervisors and Mental Health Workers (Mental Deficiency) and Assistant Occupation Centre Supervisor and Mental Health Worker (Mental Deficiency) to Occupation Centre Supervisors and Male Assistant Occupation Centre Supervisor respectively. These Officers are no longer responsible for the visitation of cases who are under statutory supervision, these duties being performed by the Duly Authorised Officers.

To enable the Duly Authorised Officers to carry out these duties arrangements were made for one of the Officers who was acting in a part-time capacity for relief purposes to be employed wholtime.

(c) *Co-ordination with Regional Hospital Boards and Hospital Management Committees.*

The arrangements remain unchanged.

(d) *Duties delegated to Voluntary Organisations.*

No duties are delegated to voluntary organisations.

(e) *Whether arrangements have been initiated for the training of Mental Health Workers.*

The Duly Authorised Officers attended courses of lectures at Little Plumstead Hospital and a Brains Trust arranged by the Norfolk County Council.

(ii) ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

(a) *Under Section 28 of the National Health Service Act, 1946.*

Prevention, Care and After-Care.

No special action has been taken with reference to the after-care of mental patients. One full-time Psychiatric Social Worker who is attached to the Hellesdon Hospital does the after-care work for cases who have been in that hospital. If the assistance of the Duly Authorised Officer is requested it is readily given.

(b) *Under the Lunacy and Mental Treatment Acts, 1890—1930
by Duly Authorised Officers.*

The Duly Authorised Officers have dealt with the following cases under the Lunacy and Mental Treatment Acts, 1890-1930:—

Cases admitted to Hospital:—	Male	Female	Total
Lunacy Act, 1890 (Sect. 16) ...	17	29	46
Lunacy Act, 1890 (Sect. 20) ...	31	41	72
Mental Treatment Act, 1939 :—			
Temporary	3	2	5
Voluntary	38	54	92
Cases examined under Lunacy Act, 1890 (Sect. 16) but not certified	5	2	7
	<hr/> 94	<hr/> 128	<hr/> 222
Dealt with by City Police under the Lunacy Acts and certified ...	1	2	3
Voluntary admissions :—			
Hellesdon Hospital ...	104	124	228
St. Andrew's Hospital, Thorpe	—	—	—
	<hr/> 199	<hr/> 254	<hr/> 453

Discharges from Mental Hospitals were as under :—

	Male	Female	Total
Hellesdon Hospital ...	140	189	329
St. Andrew's Hospital, Thorpe	1	1	2
	<hr/> 141	<hr/> 190	<hr/> 331
Deaths of Norwich persons in Hellesdon Hospital ...	20	34	54
Totals ...	<hr/> 161	<hr/> 224	<hr/> 385

THE VALE HOSPITAL, SWAINSTHORPE.

This hospital comes under the supervision of the Medical Superintendent, Hellesdon Hospital. Persons over 65 years of age suffering from Senile Dementia are admitted without certification under the Lunacy Acts. 10 males and 16 females were admitted during the year.

(c) *Under the Mental Deficiency Acts, 1913-1938.*

Ascertainment.

Most of the cases ascertained are referred by the Education Authority under Section 57 of the Education Act, 1944. Others are notified by Medical Practitioners and some are received from other sources.

Details of the cases reported are as follows :—

(a) Cases referred by Education Authority (Sect. 57 Education Act, 1944).	Male	Female	Total
(i) Under Section 57 (3)	—	3	3
(ii) Under Section 57 (5)	2	1	3
(b) Other cases reported ...	1	3	4
Totals ...	3	7	10

The foregoing cases were dealt with as under :—

	Male	Female	Total
Placed under Statutory Supervision ...	1	7	8
Admitted to Institutions ...	—	—	—
Pending decision ...	2	—	2
Totals ...	3	7	10

(d) *Cases admitted to Mental Defective Hospitals.*

16 cases were admitted to Little Plumstead Hospital for temporary treatment.

STATISTICS.

On 31st December, 1955, there were :—

(i) Mental Defectives :—

(a) *In Hospitals:*—

	Male	Female	Total
Little Plumstead Hospital and ancillary Hospitals	109	96	205
Royal Eastern Counties, Colchester ...	17	3	20
Rampton State Hospital ...	1	2	3
Risebridge Home, Haverhill	2	3	5
Moss Side Hospital, Liverpool	1	1	2
Hellesdon Hospital ...	2	2	4
	132	107	239

(b) <i>Under guardianship</i>	Male	Female	Total
Under Statutory Supervision	112	135	247
Under Friendly Supervision	12	23	35
Totals ...	124	158	282

(c) <i>Awaiting Admission to Institutions at the end of 1955:—</i>			
In own homes ...	5	8	13
In West Norwich Hospital...	—	1	1
In Dr. Barnardo's Home ...	1	—	1
Totals ...	6	9	15

(d) *Discharges from Orders made under the Mental Deficiency Act, 1913.*

11 cases (3 male and 8 female) have been discharged from the above Act during 1955.

(ii) *Persons of Unsound Mind.*

In Hospitals:—

Hellesdon Hospital ...	247	415	662
St. Andrew's Hospital, Thorpe ...	4	2	6
Totals ...	251	417	668

VISITATION OF CASES.

The wholetime Duly Authorised Officers made 1,246 visits to a variety of cases during the year in addition to their administrative duties.

OCCUPATION CENTRE.

The Occupation Centre with accommodation for 40 mental defectives is situated at 58, Earlham Road, Norwich. These premises are the property of the Council and had been used as a Children's Home since 1942. The property is freehold and comprises a white brick and slated double-fronted residence in its own grounds, containing an area of approximately .391 acres.

The staff consists of 2 female Occupation Centre Supervisors and one male Assistant Occupation Centre Supervisor.

A Nursery Class for those defectives who are awaiting admission to an institution, 3 or 4 of whom can attend each session, was commenced on 21st February, 1955. The class meets on two half-days each week.

Subject to the parents' consent those attending at the Occupation Centre are medically examined once a year by a Medical Officer of the Public Health Department.

A Christmas Party was provided by the Health Committee.

The Norfolk and Norwich Society for Mentally Handicapped Children continues to hold its meetings at the Occupation Centre.

NATIONAL ASSISTANCE ACTS
AND
CHILDREN ACT, 1948

NATIONAL ASSISTANCE ACT, 1948—SECTION 21.

One of the Medical Officers carries out periodical visits to 11 hostels for the aged and infirm, 8 of which are administered by the Corporation. The remaining 3 are under private administration. One of these ceased to function at the end of the year.

NATIONAL ASSISTANCE ACT, 1948—SECTION 47, AND NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951.

No action was taken under these Acts.

COMMITTEE FOR THE WELFARE OF OLD PEOPLE.

There are in the city 27 Old People's Clubs and a Health Visitor is attached to each. The Chiropody Service continues.

The Committee has a "Meals on Wheels" Service, which during the year provided approximately 5,000 hot meals to old people, either on Tuesday or Friday of each week.

The Society of Medical Officers of Health is represented on the National Old People's Welfare Council by the Medical Officer of Health. Meetings are held in London on the third Monday of the first month in each quarter.

The Council has under consideration a scheme for providing bungalows, a hostel and a 3-bedroomed warden's house in the Greyhound Opening area for aged persons.

EPILEPTICS AND SPASTICS.

The Town Clerk informs me that on the 31st December, 1955, there were 7 epileptics in Part III accommodation provided by the Council and in addition accommodation was being provided on behalf of the Council for 1 at Ampthill Park House and 1 at the Maghull Homes.

Spastic cases known to be in need of institutional treatment have been brought to the notice of the Welfare Committee. One male is being provided with accommodation at the Searchlight Cripples Workshops at Newhaven, and 1 female at St. Theresa's, Predannack, Cornwall. Transport has been provided to enable a number of spastics to attend the weekly social evenings at the St. Raphael Club and to attend courses in handicrafts. There is a local branch of the National Spastics Society operating in the city.

BLIND PERSONS.

The Welfare of Blind Persons is under the control of the Welfare Committee and the Town Clerk has sent to me the following information:—

44 persons were registered as blind and 21 as partially sighted during the year. No treatment was recommended in respect of 30 blind persons (one of whom died during the year) and 12 partially sighted persons. The age groups of those for whom no treatment was recommended, including the deceased, are as follows:—

		21-49	50-64	65 & over
Registered Blind	...	1	1	28
Partially sighted	...	—	3	9

The eye defects from which they are suffering are described below.

The treatment recommended and the follow-up action taken in respect of the remaining 14 blind persons and the 9 partially sighted persons is more particularly described below and also on page 79.

REGISTERED BLIND.

Suffering from	Age.	Treatment Recommended.	Follow-up action, etc.
Cataract	83	Hospital supervision	Attends Hospital Clinic.
	72	Surgical	Unwilling to have operation.
	83	"	Do.
	92	" later if condition allows	Under medical supervision.
	85	Surgical	Attends Hospital Clinic.
	88	"	Unwilling to have operation.
	78	Hospital supervision	Attends Hospital Clinic.
	88	Surgical	Has had operation; awaiting result.
Glaucoma	81	Medical	Attends Hospital Clinic.
	83	"	Do.
	78	"	Under medical supervision.
Others	4	Hospital supervision	Under Hospital supervision.
	65	Medical	Is visited at regular intervals by Doctor.
	63	Optical	Receiving optical treatment.

PARTIALLY SIGHTED.

Cataract	68	Surgical	Is willing to have operation later.
	75	„	Do.
	72	„	Unwilling to have operation.
	70	„	To see Surgeon on 25.2.56.
Others	55	Hospital supervision	Attends Hospital Clinic.
	33	Medical	Under Hospital supervision.
	46	„	Medical supervision.
	58	Optical	Unwilling to accept medical advice.
	59	„	Received lenses prescribed by Ophthalmic Surgeon.

Registered Blind and Partially Sighted Persons registered during the Year ended 31st December, 1955, in which no treatment is recommended by Section F. of Form B.D. 8.

	Registered Blind.	Partially Sighted.
Cataract	Aged 80, 86 (2), 82, 79, 85, 77 years	Aged 62, 88, 81, 77 years.
Glaucoma	„ 68, 85 years	—
Cataract and Glaucoma	„ —	„ 90 years.
Cataract and Others	„ 85, 74, 66 years	„ 87 years.
Others	„ 82 (3), 86 (2), 43, 64, 65 (3), 91, 88, 90 (2), 79, 85, 87, 92 years	„ 72, 81, 67, 74, 55, 64 years.

FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS.

No. of cases registered during the year in respect of which Section F of B.D. 8 recommends	Cataract.	Glaucoma.	Cataract & Glaucoma.	Cataract & Others.	Others.
(a) No Treatment	7 Blind 4 Partially Sighted	2 Blind —	— 1 Partially Sighted	3 Blind 1 Partially Sighted	18 Blind 6 Partially Sighted
(b) Treatment (Medical, Surgical or Optical)	8 Blind 4 Partially Sighted	3 Blind —	— —	— —	3 Blind 5 Partially Sighted
No. of cases listed above who on follow-up action have received treatment	5 Blind —	3 Blind —	— —	— 4 Partially Sighted	3 Blind —

No case of blindness following Ophthalmia Neonatorum (see page 35) and no case of retrolental fibroplasia among premature infants came to my notice.

CHILDREN ACT, 1948.

On the instructions of the Children's Committee, a Medical Officer inspects each of the 3 Children's Homes at six-monthly intervals. One of the Homes was closed down during the year. Arrangements are also made for the dental inspection and treatment by the staff of the School Dental Department of children residing in the Homes.

SANITARY
CIRCUMSTANCES
IN
THE AREA

WATER.

I am indebted to Mr. S. N. Kelly, the Water Engineer, for the following information :—

The water supply obtained from the River Wensum and controlled by the Local Authority, was constant and adequate in amount throughout the year.

The water was subjected to prefiltration chloramination, aeration, sedimentation assisted in part by coagulation, partly slow sand and partly rapid sand filtration, and disinfection by chloramine.

The water is not liable to have plumbo solvent action.

During the year under review 305 samples of water drawn from 4 widely separated points of the distribution system were subjected to bacteriological examination at the Public Health Laboratory; all were reported to be highly satisfactory. A further 305 samples drawn from the same points and at the same times as the above, were similarly examined at the Water Department Laboratory and found to be highly satisfactory.

During the year 19 newly appointed employees were examined and 4 re-examinations of employees absent through sickness were carried out.

During the period 1st April, 1955, to 31st March, 1956, works of extension of water mains have been carried out as under :—

		City and County	
		Miles.	Yards.
Mains removed in City	...	—	48
Extension of Water Mains	...	19	299
Total length of system	...	438	1726

DRAINAGE AND SEWERAGE.

Mr. H. C. Rowley, the City Engineer, has kindly supplied me with the following information :—

SEWERAGE WORKS.

During the year ending 31st December, 1955, progress has been made in improving the efficiency and sufficiency of the sewerage system of the city, comprising the following works :—

The systematic inspection, flushing and cleaning of all sewers as necessary.

The reconstruction of sewers, found upon examination to be defective, in Orford Place, Red Lion Street, Rye Avenue and Earlham Road.

Work to mitigate flooding has been completed in Unthank Road (Christchurch Road to Upton Road).

Sewers have been laid on the new Corporation Housing Estate at Heartsease (Stage 2).

MAIN DRAINAGE AND SEWAGE PURIFICATION WORKS.

New foul sewers are being laid in the Orchard Close, Plumstead Road area and 131 properties will be converted from cesspool to main drainage.

Work on the construction of approximately one-third of the new Sewage Disposal Works at Whitlingham, which deals with the flow from the "Faiblo" area and the Heartsease Estate, was completed in October. Plans have been prepared and tenders have been received for the construction of Stage 2.

Tenders have been invited for the main section (Trowse Pumping Station to Hellesdon) of the North Western Intercepting Sewer.

ANNUAL REPORT

OF

THE SENIOR SANITARY INSPECTOR, 1955.

To the Rt. Worshipful The Lord Mayor, Aldermen and Councillors of the County Borough of Norwich.

MY LORD MAYOR, LADIES AND GENTLEMEN,

I have pleasure in presenting to the Council my report on the work of the Sanitary Service during 1955. In doing so I should like to draw your attention to several matters concerning various aspects of the work of the Department.

SANITARY INSPECTION AND HOUSING.

The Housing Repairs and Rents Act, 1954, required all local authorities to submit to the Minister of Housing and Local Government proposals for dealing with slum clearance in their areas. The Department made a detailed survey of the whole city, and submitted a list of houses for consideration. As a result, the Medical Officer of Health reported to the Health Committee that over 1,500 houses in the city were deemed suitable for clearance within the next five years.

Byelaws "for preventing the keeping of animals so as to be prejudicial to health" came into force on the 7th October, 1955. The powers contained in these Byelaws will enable the Council to have more effective control over the keeping of animals, especially pigs.

INSPECTION AND SUPERVISION OF FOOD.

Milk.

The Milk (Special Designation) (Specified Areas) Order, 1955, came into force on 21st March. The Order specified a number of areas in various parts of the country, including Norwich and a large part of East Norfolk, in which it would be illegal to sell by retail for human consumption any milk other than specially designated milk, i.e., "Tuberculin Tested", "Pasteurised", and "Sterilised". Thus the only "raw" milk now allowed to be sold in Norwich is derived from cows in attested herds.

Meat.

The Department is still carrying out meat inspection and meat marking at the three slaughterhouses referred to in my previous Annual Report, i.e., Eaton, Swardeston and Messrs. G. E. and G. H. Pointer's premises at Aylsham Road. Although the high rate of slaughtering in the months following decontrol in July, 1954, was not maintained during 1955, the situation remains substantially as described in the introduction to my Report for 1954, and calls for no special comment.

The incidence of cysticercus bovis (a parasitic disease affecting cattle) in bovines examined at the slaughterhouses shows a sharp rise over the previous year. In 1955, 23 bovines (0.38 per cent., or nearly 4 per 1000) were found to be affected, against 13 (0.15 per cent., or 1.5 per 1000) in 1954.

PUBLIC CLEANSING.

Collection and Disposal of Refuse.

This service continues to expand as a result of the house-building programme, though the number of Council and private dwellings erected during the year (635) shows a decrease on the 1954 figure of 962. To assist with the increased work, an additional collecting vehicle was ordered but had not been delivered at the end of the year.

The public are continuing to make use of the Department's arrangements for removing and disposing of bulky articles too large for normal collection. During the year over 450 requests for special collections of this type were received and dealt with. Whilst many people appreciate these facilities, increased use of this service would help towards keeping the waste spaces of the city in a cleaner condition.

Cesspool Emptying.

In December, 1955, there were 198 cesspools in the city, compared with 248 the previous year; the number will decrease further as more houses are connected to the city sewers, and the expenditure on this service will be reduced accordingly.

Salvage.

The amounts of saleable materials salvaged from refuse and sold were approximately the same as in 1954. On two occasions during the year the Health Committee had this matter under consideration and approved certain measures with the object of providing an incentive to the employees concerned to recover larger quantities of saleable materials. From 1st August, bonus payments were restricted to those employees directly concerned in salvaging operation (i.e., refuse collectors and men employed at the Disposal Tip). In December, the Committee approved a further change in the bonus system, whereby the *percentage* of profit paid to the men as bonus would be increased above the usual 50 per cent., provided certain target figures in the amount of material collected were reached. This latter arrangement did not come into operation until 1956.

Kitchen Waste and Condemned Meat.

As mentioned in the introduction to my Report for 1954, the Processing Plant at Harford is now used for the dual purpose of (a) processing kitchen waste into concentrated pig and poultry food and (b) processing condemned meat and offal into meat-and-bone meal, and fat.

The demand for pig food lessened towards the end of the year, and the amount sold (828 tons) shows a decrease on the 1954 figure of 979 tons.

The plant installed for the full processing of condemned meat was put into operation in February. The products, meat-and-bone meal, and fat, are being sold locally.

That this Council now has an up-to-date and efficient plant for sterilising diseased meat and other food gives cause for satisfaction.

Finally, I should like to express to all members of my staff my thanks for their help and co-operation during the year.

I have the honour to be,

Your obedient servant,

G. D. KIRBY,

Senior Sanitary Inspector.

COLLECTION AND DISPOSAL OF REFUSE.

During the year approximately 43,495 tons of house and trade refuse were disposed of at Harford Refuse Tip.

The charge for collection and disposal of trade refuse from business premises is at the rate of £1 6s. 6d. per year for the weekly emptying of each bin in excess of one. Charges are also made for certain other collections—principally of refuse from the Provision Market and Cemetery, and ashes from school boiler-houses. An income of approximately £1,060 accrued from these sources. A small charge is also made to business firms who take refuse to the Tip in their own vehicles; 7,283 tonnage loads were disposed of in this way, producing an income of £364.

CESSPOOL EMPTYING.

In December, 1955, there were 198 cesspools in the city. They were emptied at regular intervals, and 5,181 vehicle loads were disposed of through the city sewers. Occupiers who wish for their cesspools to be emptied more frequently than once a fortnight are charged £1 5s. 0d. per load in respect of the additional emptyings; otherwise no charge is made.

NIGHT SOIL EMPTYING.

52 vehicle loads of privy bin refuse (i.e., 1 per week) were removed.

SALVAGE.

The following salvaged materials were collected and sold :—

				From the commencement of the salvage scheme in 1940, to the end of 1955.		
During 1955.						
			Tons	Approx. value £	Tons	Approx. value £
Paper ...	...	197 $\frac{3}{4}$	2054 $\frac{1}{2}$	7753 $\frac{1}{4}$	50256 $\frac{1}{4}$
Tins ...	...	—	—	4605	6376
Metals ...	...	4	576	590 $\frac{1}{4}$	4344 $\frac{1}{4}$
Textiles ...	...	35	1299	566	15499 $\frac{1}{4}$
Bottles and Jars ...	...	16 $\frac{1}{2}$	98 $\frac{1}{4}$	1216 $\frac{1}{4}$	6768
Bones ...	...	—	—	149	709 $\frac{1}{4}$
Rubber ...	...	—	—	70	178
Miscellaneous ...	...	—	—	14	445
			253 $\frac{1}{4}$	£4027 $\frac{3}{4}$	14963 $\frac{3}{4}$	£84576

KITCHEN WASTE AND CONDEMNED MEAT.

(a) Kitchen Waste.

During the year, 1,181 tons of raw kitchen and other waste was collected. This was processed into 828 tons of concentrated food and sold to pig and poultry-keepers; the income was £6824.

Approximately 2,100 householders had individual containers for kitchen waste. The yield from this collection was 234 tons.

Additions to the kitchen waste included 9,446 gallons of slaughterhouse blood, some of the unsound food condemned by the Inspectors (a list is given later in the Report) and offals from a firm of poultry dressers. These ingredients add considerably to the quality of the pig food.

The following is a table showing the tonnage of kitchen waste collected since the inauguration of the Concentrator Plant at Harford, together with the income from the sale of pig food.

Year ending.	Tonnage Collected.	Pig Food made and sold. Tons.	Income £
31. 3.42 (6 months only)	805	504	2292
31. 3.43 ...	2262	1414	6275
31. 3.44 ...	2203	1377	6367
31. 3.45 ...	2157	1348	6235
31. 3.46 ...	1877	1173	5426
31. 3.47 ...	1600	1000	4627
31. 3.48 ...	1592	995	4602
31. 3.49 ...	1932(a)	1207	5583
31. 3.50 ...	1607	1004	5817
31. 3.51 ...	1347	842	6099
31. 3.52 ...	1146(b)	716	5414
31. 3.53 ...	1167(c)	817	6578
31. 3.54 ...	1263	892	7653
31. 3.55 ...	1347	959	7919
31.12.55 (9 months)	804	598	4931
	<hr/> 23109 <hr/>	<hr/> 14846 <hr/>	<hr/> 85818 <hr/>

(a) Introduction of container scheme.

(b) First extension of container scheme.

(c) Second extension of container scheme.

The selling price of pig food remained at £8 5s. 0d. per ton throughout the year.

(b) *Condemned Meat.*

The following table shows the quantities of meat-and-bone meal and fat, etc., resulting from the processing of condemned meat and offal, together with the income from its sale.

	Quantity Tons	Income £
Meat-and-bone meal, or greaves ...	18 $\frac{1}{2}$	593 $\frac{3}{4}$
Fat	7 $\frac{1}{4}$	363 $\frac{3}{4}$
	<hr/> 25 $\frac{3}{4}$ <hr/>	<hr/> 957 $\frac{1}{2}$ <hr/>

VEHICLES AND EQUIPMENT.

The Department has a fully equipped garage at Fishergate, with a staff of 10 men, consisting of a Chief Mechanic, Deputy Chief Mechanic, 4 Mechanics, 3 Garage Assistants and a Clerk-Storekeeper.

The maintenance and repair of all the Department's vehicles is carried out in this garage, which has a petrol pump, pressure washer, welding plant, lathe, repair pits, hydraulic ramp, air compressor, etc.

During the year, delivery was taken of a Ford "Thames" 10 cwt. van for use by the Weights and Measures Department.

At the end of the year the fleet consisted of the following vehicles :—

- 3 Morris Lewin-Oschner Refuse Collection vehicles.
- 17 Karrier Refuse Collection vehicles.
- 1 Dennis Refuse Collection vehicle.
- 2 Commer Cesspool Emptiers.
- 1 Karrier Cesspool Emptier.
- 1 Dennis Cesspool Emptier.
- 6 Morris Commercial Lorries.
- 2 Muir Hill Dumpers.
- 2 David Brown Bulldozers and Scraper.
- 5 Vans.

One Dennis "Paxit" diesel-engined Refuse Collection vehicle was on order.

All the vehicles are not in use at the same time, which gives the maintenance and repair staff the opportunity of oiling, painting and repairing the vehicles during normal working hours.

SANITARY INSPECTION OF THE AREA.

The following is a summary of the principal work of the Department during the year, and action taken :—

- 1848 nuisances detected.
- 512 notices served by order of the Health Committee.
- 927 preliminary notices served.
- 4031 premises inspected.
- 1789 nuisances have been abated.
- 1508 special complaints have been received and the premises been inspected.

The following are the principal matters that have been dealt with :—

- 2 accumulations.
- 2 unpaved or defectively paved yards and passages.
- 41 choked drains.
- 59 defective drains.
- 299 defective water closets.
- 179 defective eaves gutters and rainwater pipes.
- 32 defective sink waste pipes.
- 82 defective, missing or insufficient dustbins.

OFFENSIVE TRADES.

The number of offensive trade premises on the register at the end of the year was :—

Dealers in rags, skins and bones	...	...	...	5
Fellmongers	...	...	...	1
Fat melters	...	...	...	1
Tripe boiler	...	...	...	1
Waterproofing	...	...	...	1
				<hr/>
				9
				<hr/>

No complaints were received during the year concerning these premises, and when inspected they were found to be in a satisfactory condition.

COMMON LODGING HOUSES.

There are two registered keepers of Common Lodging Houses, and periodic visits were made to the premises. They were found to be conducted in a clean and satisfactory manner.

MEETINGS OF OWNERS AND TRADESMEN.

Meetings between officers of my Department and property-owners and others, or their tradesmen, are frequently arranged for the purpose of discussing matters of which notice has been given

by the Department, e.g., repairs to houses. 264 such meetings were held during the year.

DRAINAGE.

935 visits and 118 re-visits were made to premises in connection with choked and/or defective drains, or alterations to, or reconstructions of, drainage systems.

TENTS, VANS AND SHEDS.

17 inspections of caravans have been made during the year.

SANITARY CONDITION OF THEATRES, MUSIC-HALLS, ETC.

During the year 11 inspections were made, and, on the whole, conditions were found to be satisfactory.

PIGGERIES.

During the year 45 inspections of piggeries were made. A small number of complaints were received from persons residing in close proximity to some of the piggeries.

RATS AND MICE DESTRUCTION.

Four rodent operators were employed throughout the year; sewer treatment being carried out by them in addition to their normal duties.

The following tables show the amount of work done and results obtained :—

TREATMENT FOLLOWING COMPLAINTS.

		Dwelling Houses.	Business Premises.	Other Premises.	Total.
New complaints	...	1125	75	29	1229
Premises cleared	...	952	67	30	1049
Follow-up treatment	...	735	3	7	745
Total number of premises dealt with	... ..	1687	70	37	1794

Pre-baiting.

Number of points baited with 4 oz. baits	...	1320	14	49	1383
Number of points from which bait (either whole or part) taken	...	552	9	23	584
(equivalent number of 4 oz. baits)	...	826 $\frac{3}{4}$	9 $\frac{1}{2}$	30 $\frac{1}{2}$	866 $\frac{3}{4}$

Poison baiting.

Number of points from which bait (either whole or part) taken ...	1074	111	25	1210
(equivalent number of 4 oz. baits) ...	370½	4½	12	387

In previous years the types of poison used in rat-baits have necessitated the laying of preliminary unpoisoned baits; however, increasing use is now being made of “Warfarin” poison in baits, thereby eliminating a certain amount of pre-baiting.

TREATMENT FOR RATS IN SEWERS.

	Test Bait.	1st Treat-ment.	2nd Treat-ment.
Number of manholes pre-baited ...	354	1876	1318
Number of manholes baited from which pre-bait taken ...	153	588	427
Total amount of pre-bait taken ...	820ozs.	3111ozs.	2629ozs.

Manholes from which pre-bait was taken were all poison-baited; no records are available of the quantity of poison bait taken, since, under instructions from the Ministry of Agriculture, Fisheries and Food, the manholes are not re-inspected for that purpose.

TREATMENT AT HARFORD REFUSE TIP.

Eight treatments were carried out during the year using baits containing zinc phosphide poison, with the following total results:—

Number of points laid ...	...	...	1120
Number of points from which pre-bait was taken ...	...	...	649
Total amount of pre-bait taken ...	...	...	7330 ozs.
Number of points from which poison bait taken ...	...	...	561
Amount of poison bait taken ...	...	...	1722 ozs.

FACTORIES.

There are 572 factories using mechanical power and 70 which do not use power.

Inspections for the purpose of provisions as to health :—

Premises.	Inspection- tions.	Written Notices.	Occupiers Prosecuted.
Factories with mechanical power	233	25	—
Factories without mechanical power	62	—	—
Other premises under the Act (including works of building and engineering construction but not including outworkers' premises)	15	—	—
Totals ...	310	25	—

		Number of Defects.		
Defects.		Found.	Remedied.	Referred by H.M. Inspector.
Want of cleanliness	... ..	6	2	—
Overcrowding	... ..	1	1	—
Inadequate ventilation	... ..	3	3	3
Ineffective drainage of floors	... ..	1	1	—
Sanitary conveniences :—				
(a) insufficient	... ..	2	2	—
(b) defective	... ..	17	6	7
(c) not separate	... ..	1	—	—
Other offences	... ..	5	1	—
Totals ...		36	16	10
		—	—	—

Four factories obtain their supply of water from sources other than the Council's supply (one factory has two wells, bringing the total to five).

The Public Analyst took samples of these supplies each quarter for chemical analysis, and forwarded the results of his analyses to the Medical Officer of Health. On each occasion the samples were certified as being satisfactory and fit for drinking and general purposes.

Samples for bacteriological examination were taken at the same times by a member of my staff, and submitted to the Public Health Laboratory; in each case the certificate described the water as being "satisfactory" or "highly satisfactory."

OUTWORKERS.

In February, 704 outworkers were notified, and in August 604 were notified (463 in connection with the making, etc., of wearing apparel, 129 with crackers, 2 with brushmaking, and 10 with box making). The majority of the names appeared on both lists.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951.

7 premises are registered for the purpose of upholstery, etc., and one of these is also licensed annually to manufacture and store rag flock.

10 inspections were made of these premises.

2 samples of rag flock were taken; both were satisfactory.

SHOPS AND OFFICES.

145 inspections and re-inspections were made during the year, and 10 notices and letters were sent drawing the occupiers' attention to various contraventions.

The following contraventions have been abated during the year :—

- 2 defective sanitary conveniences.
- 14 premises dirty or defective.
- 2 absence of Weekly Closing Notice.
- 1 absence of Assistants' Weekly Half-holiday Notice.

PET ANIMALS ACT, 1951.

10 premises were licensed during the year, and 27 inspections of the premises were made.

OPEN-AIR BATHS.

Lakenham Swimming Bath.

11 samples of water were taken for bacteriological examination. In every case the report was "nil b.coli per 100 ml."

4 samples of water were taken for chemical analysis, and in each case the Public Analyst reported that the clarity and general appearance of the sample was satisfactory.

Eagle Swimming Bath, and vicinity.

118 samples of water were taken for bacteriological examination.

The results of samples taken during July, August and September from the south side of the river and including the swimming bath showed high faecal coli counts in most cases. The samples were taken on various dates and were practically the same throughout. On no occasion were organisms of the dysentery, enteric and food-poisoning groups found.

On one occasion a sample of effluent was taken from the surface water sewer in Nelson Street (which discharges its effluent into the river above and in close proximity to the Eagle Bath) and was found to be heavily contaminated with faecal coli. An inspection of the Nelson Street surface water sewer, from Alexandra Road to a point near Heigham Street, where the River Wensum backs up the sewer from Heigham Watering, was made by a member of my staff. Evidence of pollution was noticed in the Nelson Street surface water sewer near the junction of the Armes Street surface water sewer, and also at a point in the Nelson Street surface water sewer where the river flows into the sewer outlet. It would appear that the degree of pollution from the surface water sewer into the Heigham Watering depends on the rainfall, and was heavier in 1955 than in former years. More samples were taken in this area than in previous years.

9 samples of water were submitted to the Public Analyst for chemical analysis; these revealed similar conditions to those of former years.

River Yare in vicinity of Earlham Park Paddling Pool.

10 samples of water were taken for bacteriological examination. These revealed that the water contained a large number of *b.coli*, and that on several occasions the faecal coli count reached more than 900 per 100 ml. On no occasion, however, has the water contained organisms of the dysentery, enteric and food-poisoning groups. Further investigations have been carried out in the area; the contamination revealed by the results of these samples is in part due to the unsatisfactory drainage systems of nearby premises.

11 samples of water were submitted to the Public Analyst for chemical analysis, and the reports indicated a normal type of river water somewhat similar to that of the River Wensum.

CANAL BOATS.

The Town Clerk informs me that the total number of boats on the register is 3. These boats have been inspected periodically and all were found clean and well kept. There were no fresh registrations but three cancellations have been made. There has been no infringement of the Acts and Regulations, no case of infectious disease occurred and no boat was detained for cleansing and disinfection.

HOUSING.

SLUM CLEARANCE OPERATIONS.

39 families were re-housed in 1955 from areas which have been confirmed by the Minister; 54 families were re-housed from individual unfit houses; 6 families voluntarily vacated their houses.

CLEARANCE AND COMPULSORY PURCHASE ORDERS.

During the year the following areas were surveyed. The number of houses involved was 324, with a population of 726.

		Dwellingshouses, etc.		Population
Alderson Street	...	22	...	44
5/19 Hall Road	...	60	...	125
29/35 Hall Road	...	4	...	10
Hobart Lane, etc.	...	49	...	121
45/55 Hall Road	...	6	...	16
The County Borough of Norwich Declaratory Order, 1948, Compul- sory Purchase Order, 1955— Vauxhall Street, etc. No. 2—				
Dwellingshouses,	Shops			
Lock-up Shops	...	183	...	410
TOTAL		324	...	726

STATISTICS.

New houses and flats were erected during the year as follows:—

(a) By the Council	...	...	499
(b) Privately	...	...	136

1. INSPECTION OF DWELLING-HOUSES.

1. (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	3885
(b)	Number of inspections made for the purpose	...				8087
2. (a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	...	...	...	...	1532
(b)	Number of inspections made for the purpose	...				1748
3.	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	...	...	...	...	406
4.	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation					1134

2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

Number of dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	484
---	-----	-----	-----	-----	-----	-----

3. ACTION UNDER STATUTORY POWERS.

A—Proceedings under Sections 9, 10, 11 and 16 of the Housing Act, 1936:—

1.	Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	—
2.	Number of dwelling-houses which were rendered fit after service of formal notices :			
(a)	by owners	...	...	—
(b)	by Local Authority in default of owners	...		—

B—Proceedings under Public Health Acts:—

1.	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	428
2.	Number of dwelling-houses in which defects were remedied after service of formal notices :		
(a)	by owners (including 169 in respect of which notices were served in 1953 and 1954)	...	268
(b)	by Local Authority in default of owners	...	—

C—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

1. Number of dwelling-houses in respect of which Demolition Orders were made	43
2. Number of dwelling-houses demolished in pursuance of Demolition Orders	29
3. Number of dwelling-houses in respect of which undertakings not to re-let were accepted	6
4. Number of Demolition Orders determined, the premises having been rendered fit for habitation	4

D—Proceedings under Section 12 of the Housing Act, 1936 :—

1. Number of separate tenements or underground rooms in respect of which Closing Orders were made	9
2. Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	—
3. Number of separate tenements on which Closing Orders were operative or undertakings had been accepted and which were demolished	6

E—Proceedings under Section 10 (1) of the Local Government (Miscellaneous Provisions) Act, 1953 :—

1. Number of Houses on which Closing Orders were made	24
---	----

F—Proceedings under Section 3 of the Housing Act, 1949 :—

1. Number of Houses on which Closing Orders were made	—
2. Number of individual Unfit Houses represented	75

4. HOUSING ACTS, 1936—PART IV—OVERCROWDING.

*Note:—*The following figures relate to the overcrowding survey carried out under the Housing Act, 1935, and to those cases of overcrowding which have come to our notice subsequently. Owing to the prevailing housing difficulties, overcrowding in private dwelling-houses and on the Council's estates, the overcrowding figure must certainly be higher. Without a detailed survey, however, it would be difficult to present a true picture of the problem at the present time.

(a) (1) Number of dwellings overcrowded at the end of the year	23
(2) Number of families dwelling therein	38
(3) Number of persons dwelling therein	195
(b) (1) Number of new cases of overcrowding reported during the year	17
(2) Number of families dwelling therein	36
(3) Number of persons dwelling therein	157

(c)	(1)	Number of cases of overcrowding relieved during the year	21
	(2)	Number of families concerned	42
	(3)	Number of persons concerned in such cases ...	204
(d)		Particulars of any case in which dwellinghouses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	—

5. HOUSING REPAIRS AND RENTS ACT, 1954—SECTION 26.

During the year the following applications were received:—

	<i>No. received.</i>	<i>No. granted.</i>	<i>No. refused.</i>
Applications for Certificates of Disrepair	37	32	1 withdrawn 2 refused 2 pending
Applications for revocation of Certificates of Disrepair ...	20	18	2 pending

6. ERADICATION OF BED BUGS.

No houses were treated for the eradication of bed bugs.

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

There were 68 registered distributors selling milk during the year; licences were granted as follows:—

Dealers' licences to sell Tuberculin-Tested Milk ...	53
Dealers' licences to sell Pasteurised Milk	50
Pasteurisers' licences	3
Supplementary licences to sell Tuberculin-Tested Milk	15
Supplementary licences to sell Pasteurised Milk ...	15
Samples of milk tested by the Gerber process in the office	83
Found to be unsatisfactory	—
Samples of Tuberculin-Tested Milk examined bacteriologically	23
Failed to pass Methylene Blue Test	2
Samples of Pasteurised Milk examined bacteriologically	110
Failed to pass Methylene Blue Test	3

Samples of Tuberculin-Tested Pasteurised Milk examined bacteriologically	...	...	...	20
Failed to pass the Phosphatase Test	...	...	...	—
Samples of Milk taken for chemical analysis	...	...	...	18
Samples deficient in milk-fat	...	...	...	11
Samples of milk supplied by producers residing outside the city were examined for the presence of Tubercle Bacilli. All were satisfactory	...	...	...	11

CARCASES AND OFFAL INSPECTED AND CONDEMNED DURING 1955 AT

1. Public Slaughterhouse, Eaton.
2. Public Slaughterhouse, Swardeston.
3. Messrs. Pointer, Aylsham Road.
4. Messrs. Weddel's Meat Depot.

	Cattle, excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed and inspected	5242	609	158	5054	24,748
<i>All diseases except Tuberculosis and Cysticerci.</i>					
Whole carcasses condemned	2	4	1	7	20
Carcases of which some part or organ was condemned	1928	195	6	203	2714
Percentage of the number inspected affected with disease other than Tuberculosis and Cysticerci	36.81 %	32.676 %	4.43 %	4.15 %	11.047 %

Tuberculosis only.

Whole carcasses condemned ...	16	16	1	—	5
Carcases of which some part or organ was condemned ...	394	113	—	—	911
Percentage of the number inspected affected with Tuberculosis ...	7.82%	21.18%	.63%	—	3.7%

Cysticercosis.

Carcases of which some part or organ was condemned ...	23	1	—	—	—
Carcases submitted to treatment by refrigeration ...	23	1	—	—	—
Generalised and totally condemned	—	—	—	—	—

No horses were slaughtered for human consumption.

CARCASES, PARTS OF CARCASES, AND ORGANS EXAMINED AND CONDEMNED FOR DISEASES OTHER THAN TUBERCULOSIS

DISEASE OR CONDITION.	Whole Carcases and Offal	Forequarters	Hindquarters	Diaphragms	Hearts	Heads and Tongues	Kidneys	Livers	Lungs	Mesenteric Fats	Meat, lbs.	Spleens	Stomachs	Omenta	Udders
1 CATTLE—															
Abscesses ...	—	—	—	—	—	9	3	288	6	—	9	—	—	—	—
Actinomycosis ...	—	—	—	—	—	54	—	54	3	—	—	—	—	—	—
Angiomatosis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bruising ...	—	—	—	—	—	—	—	—	—	—	15	—	—	—	—
Carcinoma ...	—	—	—	—	2	—	—	—	2	—	—	—	—	—	—
Cirrhosis ...	—	—	—	—	—	—	—	81	—	—	4	—	—	—	—
Congestion ...	—	—	—	—	—	—	18	—	6	—	—	—	—	—	—
Cystic ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cysticercus bovis ...	—	—	—	—	7	18	—	—	—	—	—	—	—	—	—
Distomatosis ...	—	—	—	—	—	—	—	981	—	—	—	—	—	—	—
Fatty degeneration ...	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
Fatty infiltration ...	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—
Inflammation ...	—	—	—	—	3	—	—	—	—	—	—	12	—	—	—
Johannes Disease ...	2	—	—	—	—	—	—	—	—	1	—	—	—	—	6
Mastitis ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Moribund ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Necrosis ...	—	—	—	—	—	—	—	6	—	—	—	—	—	—	—
Nephritis ...	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—
Parasitic ...	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—
Pentestomum denticulatum ...	—	—	—	—	—	—	—	—	—	9	—	—	—	—	—
Pericarditis ...	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—
Peritonitis ...	—	—	—	—	—	—	—	2	—	—	—	4	—	—	—

CARCASES, PARTS OF CARCASES AND ORGANS, CONDEMNED FOR TUBERCULOSIS

KIND OF ANIMAL	Whole Carcases and Offal											
	Forequarters	Hindquarters	Diaphragms	Hearts	Heads and Tongues	Kidneys	Livers	Lungs	Mesenteric Fats	Meat, lbs.	Spleens	Stomachs
Cattle ..	33	11	7	16	210	—	80	283	249	434	4	5
Pigs ..	5	3	—	29	580	—	29	45	402	270	12	3
TOTALS ..	38	14	7	45	790	—	109	328	651	704	16	8
												7

SUMMARY.

Tuberculosis ..	38	14	7	7	45	790	—	109	328	651	704	16	8	7
Other Diseases ..	33	—	—	—	356	96	116	1766	2104	51	467	29	21	6
TOTALS ..	71	14	7	7	401	886	116	1875	2432	702	1171	45	29	13

The comparison with the previous five years of the percentages of carcasses affected is as follows:—

All diseases except Tuberculosis.

		Cattle, excluding cows. %	Cows. %	Calves. %	Sheep and lambs. %	Pigs. %
1950	...	35.36	35.6	0.43	8.39	5.4
1951	...	33.2	29.4	0.38	9.36	8.7
1952	...	34.66	36.9	0.72	13.32	4.7
1953	...	33.32	33.78	0.36	12.2	5.46
1954	...	28.62	30.55	1.43	9.2	11.19
1955	...	37.25	32.83	4.43	4.15	11.05

Tuberculosis only.

		Cattle, excluding cows. %	Cows. %	Calves. %	Sheep and lambs. %	Pigs. %
1950	...	15.1	34.96	0.05	0.0	1.45
1951	...	13.79	23.8	0.12	0.0	2.56
1952	...	11.4	18.4	0.1	0.0	2.64
1953	...	10.4	19.5	0.0	0.0	0.59
1954	...	12.2	20.7	0.0	0.0	2.6
1955	...	7.82	21.18	0.63	0.0	3.7

Other foods condemned as being unfit for human consumption included the following. Some of these articles were mixed with the kitchen waste and manufactured into Pig Food at the concentrator plant.

2104	tins meat.	76	lbs. currants.
2805	tins fruit.	20	pkts. cereal.
443	tins fish.	42	lbs. cashew nuts.
1089	tins milk.	379	lbs. bacon.
1084	tins vegetables.	17	lbs. pork sausage.
22	tins cream.	57	lbs. beef sausage.
154	tins soup.	40	lbs. ham.
1003	tins tomatoes.	5	chickens.
11	tins tomato concentrate.	107	lbs. ox liver.
73	tins jam.	2058	lbs. lambs liver.
10	tins spaghetti.	5	lbs. corned beef.
3	jars horseradish.	3153	lbs. beef.
21	jars pickle.	7	lbs. pork.
44	jars jam.	80	lbs. shrimps.
130	jars meat and fish paste.	96	lbs. prawns.
4	jars chutney.	198	st. fish.
17	jars orange curd.	33	lbs. fruit drops.
61	jars banana curd.	8½	doz. chocolate
28	bottles sauce.		marshmallows.

1	bottle pickle.	72	pkts. sponge mixture.
12	bottles orange squash.	10	pkts. cake flour.
2	bottles coffee.	84	lbs. fruit jellies.
4½	tons bananas.	34	lbs. oatmeal.
224	lbs. figs.	14	lbs. pearl barley.
31	lbs. dates.		

CHEMICAL EXAMINATION OF FOOD.

Article.	Number of samples examined.		Number of samples adulterated.	
	Formal.	Informal.	Formal.	Informal.
Almond Flavouring	...	—	1	—
Aspirin	...	—	1	—
Barbadoes Sugar	...	—	1	—
Beef Brawn	...	—	1	—
Beef Sausages	...	—	2	—
Black Pudding	...	—	1	—
Brawn	...	—	1	—
Butter	...	—	4	—
Buttered Almonds	...	—	1	—
Butter Puff Biscuits	...	—	1	—
Butter Crunch	...	—	1	—
Butter Drops	...	—	2	—
Buttered Chocolate	...	—	1	—
Buttered Ginger	...	—	1	1
Butter Macaroons	...	—	1	—
Buttered Rolls	...	5	2	1
Buttered Toffees	...	—	1	—
Cheese Spread	...	—	3	1
Corned Beef	...	—	1	—
Cheese Spread with Ham	...	—	1	—
Cooked Spaghetti in Tomato Sauce and Cheese	...	—	1	1
Coffee	...	—	1	—
Compound Tablets of Codeine	...	—	1	—
Coconut Chips	...	—	1	—
Cornflour	...	—	1	—
Condensed Milk	...	—	1	—
Cream	...	—	1	—
Crab Meat	...	—	1	—
Custard Powder	...	—	1	—
Devon Cream	...	—	1	1
Demarara Sugar	...	—	1	—
Double Cream	...	—	1	—
Dressed Crab	...	—	1	—
Dripping	...	—	3	—
Easy Mix for making Cakes	...	—	1	—
Esko Whipping	...	—	1	—

Fish Paste ...	...	—	1	—	—
Fish Cakes ...	...	—	3	—	—
Flavoured Milk	...	—	1	—	—
French Mustard	...	—	2	—	—
Fruta Milk	...	—	1	—	1
Full Cream Milk Drink	...	—	2	—	—
Garden Mint in Vinegar	...	—	1	—	—
Gelatine ...	...	—	1	—	—
Golden Butter Mints...	...	—	1	—	—
Grapefruit Squash	...	—	1	—	—
Ground Almonds	...	—	1	—	—
Ground White Pepper	...	—	1	—	—
Ham Spread	...	—	1	—	—
Hot Milk ...	...	12	1	3	—
Ham and Beef Paste	...	—	1	—	—
Ice Cream ...	...	1	11	—	—
Iced Lolly ...	...	—	3	—	—
Jellied Veal	...	—	1	—	—
Jelly Creams	...	—	1	—	—
Jelly Crystals	...	—	1	—	—
Juice of Real Lemons	...	—	1	—	—
Lemonade Powder	...	—	3	—	—
Lemon Squash	...	—	2	—	—
Liquid Paraffin	...	—	1	—	—
Liver Sausage	...	—	1	—	—
Malt Vinegar	...	—	3	—	—
Marzipan ...	...	—	2	—	—
Meat Pie ...	...	—	1	—	—
Meat Paste...	...	—	3	—	—
Milk ...	...	18	4	11	1
Minced Beef	...	—	6	—	—
Minced Chicken...	...	—	1	—	—
Minced Turkey	...	—	1	—	—
Mint Sauce...	...	—	1	—	—
Mixed Cut Peel	...	—	2	—	—
Moutarde a L'estragon	...	—	1	—	—
Meringues ...	...	—	4	—	1
Meringue Powder	...	—	1	—	1
National Milk Bread Loaf	...	—	1	—	—
Natural Crab	...	—	1	—	—
Nescafe	...	—	1	—	—
Nut Cream Toffee	...	—	1	—	—
Old Fashioned Butter Drops	...	—	1	—	—
Orange Drink	...	—	3	—	—
Orange Juice	...	—	1	—	—
Orange Squash	...	—	1	—	—
Peanut Butter	...	—	1	—	—
Pepper Flavoured Compound	...	—	1	—	—
Pickled Red Cabbage	...	—	1	—	1

Pineapple Juice	...	...	—	2	—	—
Pork Lard	...	...	—	1	—	—
Pork Sausages	...	...	2	34	—	—
Pork Sausage Meat	...	...	—	2	—	—
Powder Glucose with Vitamin D	...	...	—	1	—	—
Processed Cheddar Cheese	...	...	—	1	—	—
Pure Buttered Walnuts	...	...	—	1	—	—
Pure Dairy Cream	...	...	—	1	—	—
Pure Cream	...	...	—	1	—	—
Refined Borax	...	...	—	1	—	—
Regasprin	...	...	—	1	—	—
Rice	...	...	—	1	—	—
Rich Cream	...	...	—	1	—	1
Saccharin Tablets	...	...	—	4	—	—
Sausages	...	...	—	2	—	—
Sausage Rolls	...	...	—	1	—	—
Semolina	...	...	—	2	—	—
Skimmed Milk Powder	...	...	—	1	—	—
Spaghetti and Cheese...	...	...	—	1	—	—
Spaghetti in Tomato Sauce with Cheese	...	...	—	2	—	2
Special Vinegar flavoured with Chillies	...	...	—	1	—	—
Sweetened Cake and Bun Mixture	...	...	—	1	—	—
Sweetened Lemonade Powder	...	...	—	1	—	—
Sweet Packet Tobacco	...	...	—	1	—	—
Sweet Cigarettes	...	...	—	1	—	—
Table Jelly	...	...	—	8	—	—
Table Jelly Crystals	...	...	—	1	—	—
Tincture of Iodine	...	...	—	6	—	2
Tinned Bread Loaf	...	...	—	1	—	—
Tomato Juice Cocktail	...	...	—	1	—	—
Tonic Phosphates	...	...	—	1	—	—
White Pepper	...	...	—	3	—	—
Wine Jelly	...	...	—	1	—	—
Wine Vinegar	...	...	—	1	—	—
Winter Candy	...	...	—	1	—	—
Wonder Orange Crush	...	...	—	1	—	—
				38	224	16
						16

The following action was taken in respect of the 16 formal samples found to be adulterated.

A "buttered roll" was found to contain not butter but margarine; verbal warning was given.

In another "buttered roll" about half the fat was found to be not butter; a letter of warning was sent by the Town Clerk.

Three samples of hot milk were found to contain added water. In one case the vendor was prosecuted and fined £2. In another, a letter of warning was sent by the Town Clerk, and in the other a verbal warning was given.

Eleven other samples of milk were found to be deficient in milk-fat. As the producer resided in the county, the matter was referred to the Milk Production Officer of the Ministry of Agriculture, Fisheries and Food for investigation.

In addition, two court cases were taken relating to carrying milk in unsealed churns; one case was dismissed, and the other resulted in a fine of £4.

For exposing for sale tomatoes bearing a false trade description and no indication of the country of origin, a trader was fined £3.

Of the 18 samples of dehydrated egg albumen and compounds with an egg albumen base, submitted to the Public Health Laboratory for bacteriological examination, six were found to be affected with *Salmonella* Thompson, and one of the six was also found to be affected with *Salmonella* Typhimurium. It was found that five of the six affected samples came from eggs of Chinese origin. The remaining twelve samples were found not to contain organisms of the dysentery, enteric and food-poisoning groups. Six samples of cakes in which dehydrated egg albumen or dried egg compounds were used were also submitted for bacteriological examination and all were found to be not contaminated. (Later, a report on this matter was made to the Health Committee, who resolved that the Association of Municipal Corporations be informed of the situation, and that they should be asked to make representations to the Ministry of Health that steps should be taken to ensure the proper sterilisation of these articles before being supplied for use in the preparation of food.)

ICE-CREAM.

54 samples of ice cream were bacteriologically examined. The samples were obtained from 11 different manufacturers, and details of the results are contained in the following table:—

RESULTS OF METHYLENE BLUE TEST FOR THE 12 MONTHS ENDING 31ST DECEMBER, 1955.

Manufacturer.	Total No. of samples taken.	Grade 1.	Grade 2.	Grade 3.	Grade 4.
A ...	4	4	—	—	—
B ...	2	2	—	—	—
C ...	1	1	—	—	—
D ...	3	3	—	—	—
E ...	1	1	—	—	—
F ...	2	1	1	—	—
G ...	2	2	—	—	—
H ...	4	3	1	—	—
I ...	3	3	—	—	—
J ...	3	2	—	—	1
K ...	29	14	4	3	8
	<hr/> 54	<hr/> 36	<hr/> 6	<hr/> 3	<hr/> 9

Satisfactory 78%, Unsatisfactory 22%.

SYNOPSIS OF RESULTS OF SAMPLES TESTED BY THE METHYLENE BLUE TEST SINCE 1950.

Year.	Samples taken.	Number Satisfactory.	Number Un- satisfactory.	Percentage Satisfactory.	Percentage Un- satisfactory.
1950	207	145	62	70%	30%
1951	124	95	29	77%	23%
1952	136	121	15	89%	11%
1953	72	61	11	85%	15%
1954	32	32	—	100%	—
1955	54	42	12	78%	22%

10 samples of ice cream were submitted to the Public Analyst for chemical analysis; all were satisfactory.

407 persons are registered under the Norwich Corporation Act, 1933, to sell ice cream; 254 visits were made to their premises.

PRESERVED MEAT.

156 premises are registered under the Norwich Corporation Act, 1933, for the preparation and manufacture of preserved meat; 307 inspections were made during the year.

RESTAURANTS, CAFES, ETC.

There are 154 restaurant kitchens on the department's records, and 342 visits were made to them. The majority were found to be satisfactory. 17 letters were sent requesting improvements to be carried out.

DAIRIES.

There are 21 dairies on the register. 63 visits were made to them, and generally the premises have been kept in a satisfactory condition.

BAKEHOUSES.

There are 47 bakehouses on the register. 218 visits were made to them, and on the whole the premises have been kept in a satisfactory condition. 5 letters were sent requesting various improvements to be carried out.

BUTCHERS' SHOPS.

There are 146 butchers' shops on the records, and regular inspections were made of them and of the meat kept therein.

FISH SHOPS.

There are 80 fish frying shops on the records, and regular visits were made to them.

SCHOOL HEALTH SERVICE

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER

PUBLIC HEALTH DEPARTMENT,
CHURCHMAN HOUSE,
68, ST. GILES STREET,

NORWICH

17th March, 1956.

MY LORD MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report on the School Health Service for the year 1955.

THE CHANGING OUTLOOK.

Little change in the Service will be revealed by reading the Report which follows, as it is full of statistical details which make it difficult to pick out items of interest. Nevertheless, changes are taking place. Still closer links are being forged between the School Health Service and the Hospital staff, as well as with the Education Department staff. Closer contacts have been brought about by Medical Officers and Health Visitors attending Child Guidance Clinic discussion groups, by meetings between the Principal School Medical Officer, the Pædiatric, Orthopædic and Ear, Nose and Throat Consultants, to discuss particular matters of policy and the clinical opportunities afforded by Dr. Quinton at his out-patient clinics.

The limited space available for the education of both types of handicap in the two special schools at Colman Road does give an opportunity of separating, more clearly than at present, those schools by providing accommodation on another site for one of them. This is a most urgent necessity which is being taken up with the Ministry of Education.

TEN YEARS' PROGRESS.

Looking back for a moment, the last ten years reveal a very significant drop in the children referred for treatment for malnutrition, impetigo and otitis media, due no doubt to a better balanced diet, greater knowledge of food values, and how to budget wisely; also, of course, the general use of antibiotics. There is also a marked improvement in posture, as well as lower limb and foot defects.

As the nose and throat conditions have improved, and with the increase of pasteurisation of milk, enlarged cervical glands have become almost a rarity.

The policy of taking treatment facilities to the schools is vindicated in the growth of children reporting for treatment with very early minor conditions. A small outbreak of impetigo (quite a rare event) was quickly dealt with by treatment at the school concerned.

Although the general physical condition of school children has improved, the essential and fundamental basis of the School Health Service remains the routine medical inspection of age groups and the bringing forward of selected children for investigation. The growing appreciation of the child as a developing individual with physical, mental and emotional components is borne out by the changing figures of defects found over the years. These aspects of Child Health cannot be appreciated by Medical staff working in isolation: they require team work.

DENTAL TREATMENT.

In spite of being able to maintain an almost complete establishment of Dental Officers throughout the year, it has become very clear that the state of the children's teeth requires so much time to make them dentally fit that annual inspection cannot be achieved. It is apparent, therefore, that a little less than the ideal will have to be the objective for a year or two so that a greater number of mouths can be made reasonably fit.

HANDICAPPED CHILDREN.

Every handicapped child is an individual with a right to a share in human happiness, whose opportunities are so great that it needs individual consideration. Its future should be fully discussed with its parents, often after a number of specialists have submitted reports, but before the Education Authority takes action.

The opening of a voluntary treatment centre for Spastic children is to be welcomed, but it only emphasises the need for careful ascertainment, treatment and education in this group of children. Sometimes it is very difficult to separate the mental and physical handicaps amongst children of this group.

A further advancement is the approval of a scheme for teaching Partially Deaf children in a special class, thus permitting them to live at home. This will also allow the instruction of parents of young deaf children and lead all such children towards a more stable social upbringing.

The appointment of an additional Educational Psychologist will relieve the pressure on this section of the work and perhaps give wider scope for the consideration of maladjustment amongst children.

Reading the reports of the Consultant Pædiatrician reveals the influence of stress on the health of the children attending his clinics. It comes up so frequently now that straightforward physical disease is rarer. The extension of teaching facilities to children in Hospitals and to those being treated at home even for relatively short periods, will help to overcome boredom as a brake on their recovery and also bridge the gap when they return to school.

TUBERCULOSIS IN SCHOOLS.

The assistance given by Head Teachers and parents to the Medical Officers responsible for investigating contacts of Tuberculosis in schools has been most welcome, and the results gratifying. A brief summary of the cases investigated is included to demonstrate the care taken to safeguard children at school and then by means of B.C.G. inoculation give them some protection when they leave to take up their careers in industry and elsewhere.

IN CONCLUSION.

It is with pleasure that I record the continued interest and enthusiasm of all the members of the School Health Service, and thank particularly Dr. Riddel and the clerical staff for putting together this report, also the Director of Education, the Head Teachers and their staff for their assistance in many ways. The continued support of the Members of the Education Committee has been an encouragement throughout the year.

I have the honour to be,

My Lord Mayor, Ladies and Gentlemen,

Your obedient Servant,

R. C. M. PEARSON,

Principal School Medical Officer.

(1) STAFF.

See pages 11 and 12.

(2) GENERAL INFORMATION.

NATIONAL HEALTH SERVICE ACT, 1946.

Although there is a free choice to parents as to whom they may consult for defects of eyesight in their children, the vast majority attend the Authority's Ophthalmic Clinic—935 attended during the year (853 in the previous year) and in addition 23 children under school age. This clinic has not yet been taken over by the Regional Hospital Board.

The Regional Hospital Board, who took over responsibility for the Orthopædic Clinic in April, 1953, continues to arrange appointments and treatment, and keeps me informed of the recommendations made by the Consultants.

The Heart Clinic held monthly at the Jenny Lind Hospital continues to give valuable advice on the advisability or otherwise of restricting physical activities and of special precautions which may be desirable when operative procedure has to be performed.

CLINICS.

Due to the higher remuneration now offered to School Dental Officers, it is now much less difficult to fill vacancies, with the result that there was an effective strength during the year of 5 dentists.

Although there was a further drop from 3927 to 3245 in the numbers attending the Central Minor Ailments Clinic, the numbers attending the District Clinics rose from 36,444 to 42,068.

The clinic for remedial exercises at the Colman Road Open Air School which began in September, 1953, is doing useful work in collaboration with the staff of the Jenny Lind Hospital.

HEALTH OF SCHOOL CHILDREN.

For the ninth successive year the number of school children on the register shows an increase at 20,093, being 4807 above the 1946 figure. The health of the children continues to be very good.

About 83% take their school milk and 34% have school meals.

Uncleanliness of the head both in numbers and severity continues to decrease, and the figure for 1955 is only 0.45% of the total school population. This reflects great credit on the parents of Norwich children.

The number of cases of contagious skin disease is small and not a single case of ringworm of the scalp occurred among school-children during the year.

Approximately 68.8% of children have been immunised against Diphtheria and again the city was free from this former dread disease.

Apart from Sonne Dysentery, infectious disease was low.

The number of deaf children now numbers 13, and there are 5 partially deaf. During the period 1943-1951 inclusive the average was 8. There are two families with two totally deaf children in each, one family with one totally deaf and one partially deaf child, and one family with two partially deaf children. In none of these families is there a history of deafness.

HOSPITAL TREATMENT—SPECIAL ARRANGEMENTS.

In addition to the routine treatment at the local hospitals, specialist treatment required for some cases is also given at other hospitals

During the year one girl suffering from hare lip received treatment at the Plastic Surgery Centre at Queen Victoria Hospital, East Grinstead.

One boy suffering from spastic diplegia was discharged home, in July, from the St. Vincents Orthopædic Hospital, Northwood Hills, near Pinner, Middlesex, having been an in-patient there since 1950.

One girl attended for advice at St. Bartholomew's Hospital, London, on account of Congenital Heart Defect.

Two boys were treated as In-patients at the Hospital for Sick Children, Great Ormond Street, London, one for imperforate anus, and one for sub-arachnoid hæmorrhage. Another boy was treated at the Tadworth Court branch of the same hospital, for dermatomyositis.

(3) MEDICAL INSPECTION.

The arrangements for notifying Head Teachers and parents of School Medical Inspections and the assistance given by the School Nurses remain the same as in previous years.

Medical examinations of schoolchildren were carried out during the year in the age-groups as described in the Annual Report for 1954.

The number of pupils examined at the Schools during the year was as follows:—

Primary Schools.

Entrants	...	...	...	1929
Other Periodic Inspections	...	...	...	2602

Secondary Schools.

Second Age Group	...	...	...	1815
Third Age Group	...	...	...	1138
Other Periodic Inspections	625

<i>Colman Road Special School for E.S.N. Pupils</i>	...	134
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<i>Earlham Nursery School</i>	...	17
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Total	...	8260
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(a) PRIMARY SCHOOLS.

There are 40 Primary Schools (22 Infant Departments, 17 Junior Departments and 1 combined Junior and Infant School) with 4927 children in attendance in the Infant Departments, 7190 in the Junior Departments, and 283 in the combined Junior and Infant School.

Two new schools were opened during the year, namely the North Park Avenue Infant School on 20th April, and the West Earlham Junior School on 5th September.

The facts disclosed by Medical Inspection during the year and the total results attained were as follows:—

Defect or Disease.	"Specials"		Total Defects.	Referred for Treatment.	Total Defects† Treated.	Total Defects† Cured.
	Periodic Inspections.	at School or Clinic.				
Skin	152	263	415	353	7325	7077
Eye:						
Vision and Squint	336	342	678	494	453	235
						(Glasses prescribed)
Other	35	44	79	61	323	290
Ear:						
Hearing	38	31	69	42	54	1
Otitis Media ...	23	13	36	26	35	20
Other	15	20	35	25	74	66
Nose or Throat ...	382	85	467	199	426	376
Speech	74	41	115	57	179	58
Cervical Glands ...	57	8	65	13	18	6
Heart and						
Circulation	89	9	98	55	75	15
Lungs	134	22	156	60	179	13
Developmental:						
Hernia	62	4	66	20	14	13
Other	85	6	91	12	11	6
Orthopædic:						
Posture	29	1	30	7	8	1
Flat Foot	59	3	62	37	47	13
Other	278	34	312	117	206	57
Nervous System:						
Epilepsy	21	8	29	18	36	—
Other	102	49	151	82	126	19
Psychological:						
Developmental ...	159	23	182	158	133	—
Stability	15	11	26	16	158	9
Malnutrition	67	11	78	58	102	11
Other	227	173	400	337	590*	244

*Includes 2 cases of Rheumatism treated (none cured).

†These columns include cases referred from previous years, cases treated by the School Nurses at District Minor Ailments Clinics, etc.

It is known that 4 pupils were operated on for Squint, 11 for Hernia, 21 had Appendicectomy, 1 had Mastoidectomy, and 1 had Antrostomy performed.

(b) SECONDARY SCHOOLS.

There are 14 Secondary Modern Schools, 2 Secondary Grammar Schools—one for boys and one for girls—a Junior Technical School for boys, and a Junior Art School (for boys and girls).

At the end of the year, 900 boys and 789 girls were attending the Secondary Grammar Schools, 289 boys were attending the Junior Technical School, 60 boys and girls were attending the Junior Art School, and 4680 boys and girls were attending the Secondary Modern Schools.

On 10th January, 1955, the Lakenham Secondary (Modern) Girls' School was transferred to a new building adjacent to the Lakenham Secondary (Modern) Boys' School, Cecil Road.

The arrangements for carrying out medical inspections are similar to those which obtain in the Primary Schools.

At the request of the Governors, medical inspection is also carried out at the Notre Dame High School for Girls, a school not under the jurisdiction of the Local Education Authority.

At the end of the year, 655 pupils were attending this school.

The facts disclosed by Medical Inspection during the year and the total results attained were as follows:—

Defect or Disease.	Periodic Inspections		"Specials" at School or Clinic. (All Secondary Schools.)	Total Defects.	Referred for Treatment. (Schools.)	Total Defects† Treated.	Total Defects† Cured
	(a) Notre Dame School.	(b) All other Secondary Schools.					
Skin	8	108	222	338	297	2620	2459
Eye:							
Vision and Squint	34	476	262	772	545	504	295
Other	4	35	16	55	39	119	96
							(Glasses prescribed)
Ear:							
Hearing	—	17	7	24	14	19	—
Otitis Media ...	—	14	6	20	15	16	7
Other	—	5	12	17	13	27	24
Nose or Throat ...	2	58	22	82	39	77	52
Speech	—	14	9	23	19	42	16
Cervical Glands ...	—	10	—	10	1	3	—
Heart and Circulation	2	49	4	55	36	40	8
Lungs	3	65	6	74	13	44	2
Developmental:							
Hernia	—	4	1	5	1	—	—
Other	7	41	4	52	28	9	6
Orthopædic:							
Posture	—	88	12	100	51	84	4
Flat Foot	7	45	7	59	35	53	4
Other	8	94	22	124	50	87	7
Nervous System:							
Epilepsy	—	14	1	15	5	23	—
Other	2	45	7	54	31	44	3
Psychological:							
Developmental... ..	—	5	2	7	4	6	—
Stability	—	4	2	6	4	116	15
Malnutrition	—	39	2	41	20	38	3
Other	10	157	78	245	181	232*	68

*Includes 6 cases of Rheumatism treated (none cured).

†These columns include cases referred from previous years, cases treated by the School Nurses at District Minor Ailments Clinics, etc.

It is known that 2 pupils were operated on for Squint.

The following table shows the number of pupils found to be suffering from certain defects or diseases. For comparison the figures for 1954 are also given. (This table includes pupils attending the Nursery School).

Defect or Disease.	Number requiring treatment:—			1954
	Prim.	1955 Sec.	Total	
Scabies	—	—	—	1
Impetigo	29	25	54	27
Ringworm of Scalp ...	—	—	—	4
„ „ Body	—	—	—	12
Other skin diseases ...	163	142	305	338
Blepharitis	30	11	41	52
Conjunctivitis	11	8	19	36
Defective Vision and Squint ...	498	545	1043	1020
Defective Hearing	42	14	56	45
Discharging Ears	26	15	41	55
Other ear diseases	25	13	38	42
Orthopædic defects ...	161	136	297	379
Cardiovascular conditions ...	55	36	91	117
Acute Rheumatism	1	1	2	4
Chorea	3	1	4	2

(4) TREATMENT.

CHURCHMAN HOUSE CLINICS.

Schoolchildren with minor ailments, including discharging ears, from the central part of the City, are seen at the Central Clinic at Churchman House each morning, including Saturday. There is no clinic in the afternoon.

A Medical Officer is in attendance on Monday, Wednesday and Saturday morning of each week, and at these times children from all parts of the City requiring medical advice are seen. On the remaining weekday mornings a School Nurse is in attendance, between 9 and 10 a.m.

There is also a Special Clinic for children on Saturday mornings, at which children requiring special consideration are seen.

3245 attendances were made during the year at the Minor Ailments Clinics, and the Saturday morning "Special" Clinics at Churchman House, exclusive of attendances for treatment of discharging ears. This compares with 3927 attendances made in 1954.

DISTRICT CLINICS.

These clinics, twenty-four in number, were held during the year at the centres listed below.

New clinics were opened at North Park Avenue Infant School in March, 1955, and the Lakenham Secondary Modern Girls' School in November, 1955.

<i>Centre.</i>	<i>Times.</i>
Alderman Jex School	... Monday, 4-4.30 p.m., and Thursday—3.45-4.30 p.m.
Angel Road School	... Tuesday—3.45-4.30 p.m.
Catton Grove School	... Monday and Thursday—10—12 noon. Tuesday and Wednesday 10.45—12 noon.
Cavell School	... Tuesday and Thursday—3.15-4.30 p.m.
Clarkson School	... Monday and Thursday—11.15-12 noon.
Colman Road Special School	Monday to Friday (inclusive)—9.30-11 a.m.
Dowson School	... Tuesday—9.30-10.30 a.m. and Friday—10.45-12 noon.
Earlham Hall School	... Monday and Thursday—10.30—11 a.m.
George White School	. Tuesday and Thursday—2.45-3.30 p.m. Wednesday—3.15-4.30 p.m., and Friday, 4-4.30 p.m.
Gurney and Henderson School	Tuesday, Wednesday and Friday—11.15-12 noon.
Horn's Lane School	... Wednesday—2-3 p.m.
Lakenham Junior School	... Monday and Friday—3.15-4.30 p.m.
Lakenham Secondary Modern School	Wednesday—3.15-4.30 p.m.
Larkman Lane School	. Monday, Wednesday and Friday—9.30-11 a.m.
Mousehold Avenue School	... Tuesday and Thursday—2-2.30 p.m.
Nelson Street School	... Tuesday and Thursday—11.15-12 noon.
Norman School	... Monday, Wednesday and Friday—9.30-10.30 a.m. Thursday, 10.45-12 noon.
North Earlham School	.. Monday, Wednesday and Friday—11.15-12 noon.

<i>Centre.</i>	<i>Times.</i>
North Park Avenue School ...	Tuesday and Thursday— 11.15-12 noon.
Stuart School ...	Monday and Friday, 3.15-3.45 p.m., and Tuesday, 2-3 p.m.
Thorpe Hamlet Infant School ..	Thursday—2-3 p.m.
Tuckswood School ...	Monday and Friday—2-3 p.m.
Wellesley School ...	Monday, Wednesday and Friday—2-3 p.m.
West Earlham School ...	Monday and Thursday— 11.15-12 noon.

At these, the nurses treat discharging ears, minor injuries, septic sores, etc. As there is no medical officer in attendance, the nurses are instructed to refer all cases where medical advice is considered necessary to the Central Clinic at Churchman House, on either Monday, Wednesday or Saturday morning, and all cases are told to attend there during the school holidays, when the District Clinics are closed.

42068 attendances were made at these clinics during the year exclusive of attendances for treatment of discharging ears.

The following is a summary of the defects treated:—

	Churchman House Clinic.		District Clinics.	
	No. of Pupils Dis- Treated. charged.		No. of Pupils Dis- Treated. charged.	
Ringworm of the Head ...	—	—	—	—
Ringworm of the Body ...	—	—	1	1
Impetigo ...	33	30	34	28
Other Skin Diseases ...	195	173	3371	3210
Minor Eye Defects (Conjuncti- vitis, Blepharitis, Styes, etc.)	49	41	335	332
Otorrhœa ...	15	12	12	10
Ear Defects (Wax, Boils, etc).	27	24	61	58
Enlarged Glands ...	—	—	1	1
Defects of Nose and Throat ...	6	5	89	87
Miscellaneous (Minor Injuries, Bruises, Sores, Chilblains, etc.)	216	209	5967	5855
Other Defects and Diseases ...	12	11	52	52

SCHOOL DENTAL SERVICE.

The Principal School Dental Officer reports:—

DENTAL STAFF.

Miss J. K. Fife was appointed to the staff on 14th February, 1955, and relinquished her duties on 26th August on account of her forthcoming marriage.

Mr. J. M. Mitchell was appointed at the same time, and commenced duties on 2nd May.

On 3rd October, Mr. C. A. P. Steele filled the vacancy caused by the resignation of Miss Fife. This brought the staff up to the full strength of six Dental Officers, although the effective strength for the year was just under $5\frac{1}{2}$.

BRANCH CLINICS.

A new branch Dental Clinic was opened at the Infant Welfare Centre, Catton Grove School, and Mr. Mitchell started work there on 2nd May.

The surgery at Tuckswood Community Centre was re-opened on 3rd October, with Mr. Steele responsible for the dental treatment of children at the schools in that area. Spare dental equipment was also installed at the Thorpe Clinic (Stuart School) to enable work to be carried on when the Tuckswood and Catton Grove Clinics were not available.

EQUIPMENT.

Three new dental units and chairs were installed at the clinic, 36, Unthank Road, in April, May and June respectively. This means that all four surgeries are now supplied with the most up-to-date equipment.

CIVIC WEEK.

One new unit and chair were on show at St. Andrew's Hall in connection with the Civic Week Exhibition which was held in June. A dental clerk-attendant was present throughout the week demonstrating and answering questions, and considerable interest was shown by the general public.

DENTAL INSPECTION AND TREATMENT.

48 sessions were devoted to the inspection of children at school. 5559 children were inspected, and of these 4569 were found to require treatment. The number of "casuals" inspected was 5532, which is almost the same as the previous year, but on the other hand the number of attendances increased from 14074 to 16648. The reason for this is that more visits were made for conservation of teeth.

9284 fillings were inserted in permanent teeth and 316 in temporary teeth. 2310 permanent teeth and 5505 temporary teeth were extracted, and 3633 general anæsthetics were given.

TREATMENT AT THE DENTAL CLINIC.

School Children.

(Primary, Secondary Modern
and Secondary Grammar)

No. Examined at School	1955	1954	1953	1952	1951	1950	1949	1948	1947
No. Treated, including "Specials"	5559	799	5077	—	488	946	1982	3152	5520
Total number of attendances at the Clinic	6126	5380	5414	3936	3930	3582	3551	3473	3267
No. of Fillings	16648	14074	13947	9720	9174	8526	9874	10352	9086
No. of Teeth Extracted	9600	7271	7941	3044	2960	3759	5129	6573	6051
No. of Administrations of General Anæsthetics	7815	7834	8273	6449	6417	5372	5626	4598	3940
No. of Other Operations	3633	3546	3622	3096	2834	2248	2181	1635	1358
	3821	3036	2310	1369	1300	1467	1504	2367	2303

National Health Service.

Mothers—

New Cases Treated	144	145	183	173	229	349	283	311	327
Total number of Attendances at the Clinic	778	790	778	735	861	1336	1570	1885	1663
No. of Teeth Extracted	525	457	459	397	551	552	620	619	736
No. of Fillings	356	417	412	328	359	807	1134	1344	1150
No. of Other Operations ..	430	397	314	322	311	501	587	861	622
No. of Dentures Provided	85	85	59	94	80	83	120	124	142
No. of Administrations of General Anæsthetics	57	65	67	76	74	86	93	87	97

TREATMENT AT THE DENTAL CLINIC—*cont.*

Children under 5 years of age who attend no School—

	1955	1954	1953	1952	1951	1950	1949	1948	1947
New Cases Treated ...	334	309	302	344	386	316	190	121	122
Total number of Attendances at the Clinic ...	648	482	406	412	447	376	278	186	182
No. of Teeth Extracted ...	594	556	551	703	704	589	391	227	251
No. of Fillings ...	159	67	47	11	26	12	27	6	27
No. of Other Operations ...	242	161	82	3	6	22	18	35	
No. of Administrations of General Anæsthetics ...	345	321	304	380	364	271	179	132	111

OPHTHALMIC CLINIC.

124 sessions were held by the Ophthalmic Specialist during the year at Churchman House.

449 Primary and 486 Secondary school pupils, and 23 children under 5 years of age who attended no school were examined at the clinic, and glasses were prescribed in the following cases:—Primary, 232; Secondary, 281; Children under 5 years of age, 11.

INCIDENCE OF SQUINT.

Although it is difficult to know exactly how many children are found for the first time with a squint each year, the number referred for treatment from periodic medical inspection during the period 1950—1955 was as follows:—

1950	...	...	94	1953	...	...	116
1951	...	...	97	1954	...	...	72
1952	...	...	84	1955	...	...	65

TREATMENT OF OTORRHŒA.

As with other minor ailments, children suffering from otorrhœa who attend schools near the centre of the City are treated at the Central Clinic at Churchman House, while those on the outskirts are treated at the District Clinics.

The cases treated have come to notice through various agencies, but chiefly through the School Medical Staff and Head Teachers.

When considered advisable, cases are referred for examination by the specialist at the Out-patient Department of the Jenny Lind and Norfolk and Norwich Hospitals and treatment continued or modified according to his findings.

8 new cases were referred to the Ear Specialist during the year, and 1 case which had recurred.

18 other cases were also treated during the year.

26 treatments were given at the Central Clinic at Churchman House, and 433 at the District Minor Ailments Clinics.

The following table shows the total number of cases of otorrhœa in school children treated by the local authority and otherwise during the last ten years:—

1946	...	...	102	1951	...	...	75
1947	...	...	177	1952	...	...	87
1948	...	...	138	1953	...	...	95
1949	...	...	73	1954	...	...	91
1950	...	...	62	1955	...	...	51

TONSILLECTOMY, 1950-55.

Information is received from the Jenny Lind Hospital about the children whose tonsils and adenoids are removed each year, and from this information the following table has been compiled:—

1950	...	...	172	1953	...	...	467
1951	...	...	167	1954	...	...	498
1952	...	...	372	1955	...	...	289

Operations were restricted from 8th August until 4th December, 1955, inclusive, and from 17th to 31st December, 1955, as a result of the outbreak of Poliomyelitis both in the City and the surrounding County areas. In 1954, also on account of Poliomyelitis, children from certain areas were not admitted for operation.

CARDIAC CLINIC.

Facilities exist for the local authority to send children of school age and under to a Cardiac Clinic held on the first Monday afternoon of each month (August excepted) at the Jenny Lind Hospital in the charge of Dr. W. A. Oliver, M.B.E.

Appointments are made through the School Health Service, and the School Nurses visit in advance, to obtain environmental reports. The clinic arrangements are made by the Regional Hospital Board.

During the year 43 schoolchildren (including 5 new cases) were examined and the following diagnoses were made:—

			New Cases.	Old Cases.
Atrial Septal Defect	...	...	—	8
Ventricular Septal Defect	...	...	1	4
Organic Heart Disease (Congenital)			2	3
Patent Ductus Arteriosus	...	...	—	2
Cardiomegaly	...	...	—	5
Rheumatic Mitral Disease	...	...	—	8
Mild Pulmonary Stenosis	...	...	1	—
Mild Sub-Aortic Stenosis	...	...	—	1
Systolic Murmur	...	...	1	7

32 of these children were permitted to do drill and games without restriction, 9 were debarred from competitive sport, and 2 were debarred from all organised physical activities.

6 children under school age were also examined, including 3 new cases. 1 was recommended for hospital treatment, the activities of the remainder were unrestricted.

They were found to be suffering from the following defects:—

		New Cases.	Old Cases.
Organic Heart Disease (Congenital)		—	1
Patent Ductus Arteriosus	...	1	1
Fallot's Tetralogy	... ..	2	—
Systolic Murmur	... ..	—	1

ACUTE RHEUMATISM.

During 1955, 2 cases came to the notice of the School Health Service and in 1954, 4.

RINGWORM.

No. of Cases Treated.

		Local Authority.	Otherwise.	Total.
Ringworm Scalp	...	—	1	1
Ringworm Body	...	1	1	2

No new case of Ringworm of the Scalp was notified during the year.

1 girl who commenced treatment in 1954 was declared cured early in 1955.

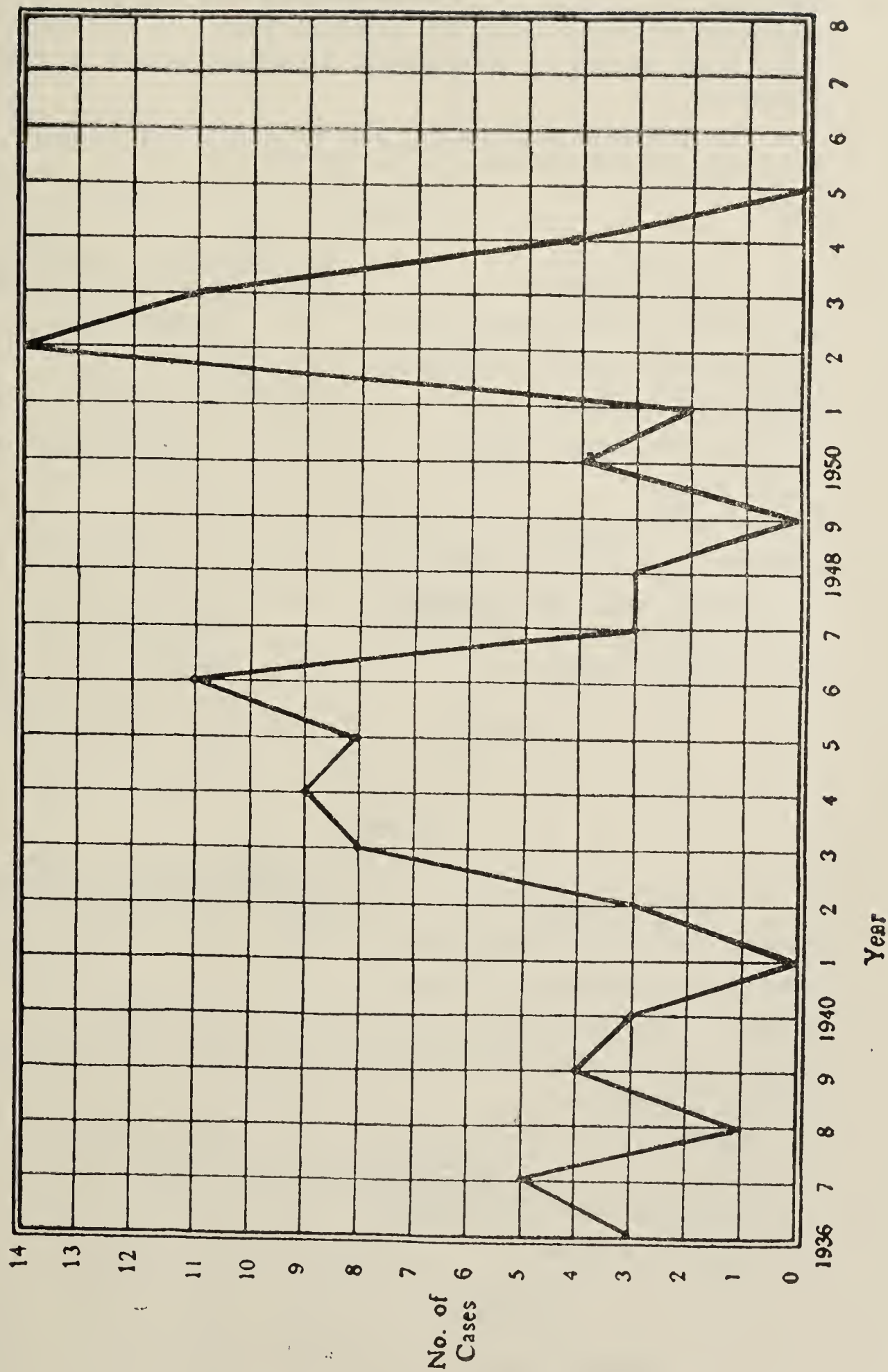
One visit was paid to a school department during the year, to inspect contacts with the Woods Lamp. No cases were discovered.

1 new case was discovered in a child under 5 years of age and was declared cured later in the year.

ORTHOPÆDIC TREATMENT.

Children suffering from orthopædic defects are referred for treatment by the School Medical Officers from school medical inspections, school clinics, etc., and are seen (with the approval of the family doctor) by the Orthopædic Surgeons at their out-patient clinics at the Jenny Lind and Norfolk and Norwich Hospitals. The initial appointments are sent to the parents through the School Health Service, and the Hospital Authorities report on all new cases seen, as well as send final reports, and information regarding defaulters. Treatment such as the supply of surgical boots and instruments, and the wedging of footwear, is arranged through the Hospital Service.

GRAPH SHOWING INCIDENCE OF RINGWORM OF THE
SCALP IN SCHOOL-CHILDREN SINCE 1936



70 new cases (Primary) and 25 new cases (Secondary) were referred during the year, while 64 Primary and 11 Secondary cases were discharged as fit. 171 Primary and 64 Secondary scholars continued treatment from the previous year. 14 are known to have been treated in Orthopædic Hospitals and 4 in General Hospitals.

The following table shows the treatment recommended and the results obtained by the end of the year:—

Primary.

Recommendation.	No. Recommended.		No. Discharged.	
	New.	Old.	New.	Old.
Exercises at School, Hospital, etc.	9	30	—	6
Exercises and wedges in footwear	11	23	—	9
Wedges in footwear	26	58	—	23
Wedges and Night Splints ...	1	9	—	4
Night Splints	—	1	—	1
Plaster and Strapping Correction	1	1	—	—
Surgical Boots and/or instruments	2	10	—	—
Operations, etc., at Hospitals (Out-patient and In-patient)	7	10	1	—
No treatment necessary ...	13	29	3	17
TOTALS ...	70	171	4	60

Secondary.

Recommendation.	No. Recommended.		No. Discharged.	
	New.	Old.	New.	Old.
Exercises at School, Hospital, etc.	7	—	—	—
Exercises and wedges in footwear	1	26	—	6
Wedges in footwear	6	12	—	2
Plaster and Strapping Correction	—	1	—	—
Electrical Treatment	1	—	—	—
Surgical Boots and/or instruments	1	11	—	—
Operations, etc., at Hospitals (Out-patient and In-patient)	4	4	1	—
No treatment necessary ...	5	10	—	2
TOTALS ...	25	64	1	10
GRAND TOTALS ...	95	235	5	70

The following table shows the diagnosis of the aforementioned cases:—

Diagnosis.	New Cases (in 1955).		Old Cases (Prior to 1955).		TOTAL	
	Primary.	Second-ary.	Primary.	Second-ary.	Primary.	Second-ary.
Posture ...	2	3	4	6	6	9
Flat Foot ...	13	6	31	15	44	21
Valgus Ankles	3	1	26	8	29	9
Pes Cavus ...	1	—	—	—	1	—
Hammer Toes	—	2	1	1	1	3
Hallux Valgus	—	1	—	5	—	6
Intoeing ...	2	—	4	—	6	—
Talipes Equino Varus ...	—	1	4	3	4	4
Outward Curvature of Tibia ...	—	—	4	—	4	—
Genu Valgum ...	23	1	40	9	63	10
Perthe's Disease	3	—	5	—	8	—
Congenital Dislo- cation of Hip- joint ...	—	—	4	—	4	—
Paralysis after A.P.M. ...	3	—	8	9	11	9
Spastic Paralysis	6	2	17	2	23	4
Pseudo Hypertrophic Muscular Paralysis, etc. ...	1	—	4	—	5	—
Miscellaneous ...	13	8	19	6	32	14
TOTALS ...	70	25	171	64	241	89

With regard to slight postural defects which are so prevalent amongst scholars attending the Secondary Grammar Schools special exercises are conducted for these children by the Gymnastic Teachers.

The following table shows the number of days spent in Institutions by orthopædic cases during the year:—

	School Cases.
Jenny Lind Hospital ...	65
Melton Lodge ...	1245
St. Vincent's Orthopædic Hospital ...	199
Royal National Orthopædic Hospital, Stan- more ...	209
Tadworth Court Hospital ...	299
TOTAL ...	2017

UNCLEANLINESS.

An Authorised Person visits the schools periodically for the purpose of examining the children for uncleanliness, and under Section 73 of the Norwich Corporation Act, 1933, she reports to this office any children she may find whose persons or clothing are in a verminous or filthy condition. Hitherto, all such children were immediately excluded from school, an informal notice acquainting the parent of the position being given to each child at the time of exclusion, with instructions that a medical certificate of fitness would have to be obtained before re-admission could be permitted.

Commencing on 29th September, 1955, however, and in accordance with a minute of the Education Physical Care (Sub) Committee, a new procedure was adopted, designed to save the embarrassment of children found with minimal head infection. Under this arrangement, any child found for the first time to be unclean is permitted to remain in attendance at school, providing the infestation is a very light one, and the Head Teacher is informed that the School Nurse will deal with the matter directly at home.

At first, no written notice was sent to the parent, it being left to the School Nurse to inform the parent of the child's condition. It was found, however, that for various reasons this could not always be done promptly, and now in every such case a letter is posted to the parent on the same day that the child is examined. This notification is followed up as soon as possible by a home visit from the School Nurse, who ensures that the parent takes the necessary steps towards cleansing the child.

All children found during the course of head inspection to have a heavy infestation, and those who are found unclean and have been found in a similar condition on a previous occasion are immediately excluded from school. An informal notice acquainting the parent of the position is posted on the same day, with instructions that when the child is clean a certificate of fitness should be obtained either from the Family Doctor, or from the Medical Officer or Nurse at the nearest Minor Ailments Clinic. The School Nurse also visits the parent to give instructions as to the best method of cleansing, and endeavours to persuade any contacts to attend for examination.

Similar action is taken in any case found by a Doctor during medical inspection or at the clinic.

The School Nurses and other authorised persons made 33023 examinations in the Primary Schools, and 10439 in the Secondary Modern Schools during the year. 75 Primary and 15 Secondary Modern School scholars were found unclean during the course of these examinations.

2327 examinations were made during the year by the School Nurses in the Secondary Grammar School (Girls), no scholars being found unclean.

It has been unnecessary for many years to examine the pupils at the City of Norwich School, and the Junior Technical and Junior Art Schools.

It is interesting to note that during 1955, 6 Infant, 7 Junior, 8 Secondary Modern, 1 Special, and 1 Secondary Grammar (Girls) Schools were free from verminous infection when inspected. Of these 23 schools, 9 were also free in 1954.

The following table shows the number of children found unclean at the Primary and Secondary Modern Schools and the results obtained:—

	1955.	1954	1953.
No. of examinations of children by the School Nurses ...	43462	52958	58012
*Total number of instances of infestation ...	95	116	139
*Total number of Individual Children concerned ...	91	102	132
*Total number of Individual Children excluded ...	76	102	132
*Total number of cases voluntarily cleansed ...	77	82	71
*Total number of cases compulsorily cleansed under arrangements made by the Local Education Authority ...	—	—	—
*Total number of cases cleansed at clinic at parents' request ...	18	34	68
*Total number of cases not cleansed (left school, under age, etc.) ...	—	—	—

*These figures include the cases found by the School Medical Officers and the School Nurses.

Of the total schoolchild population 0.45% were found during the year to have verminous heads. This contrasts very favourably with the national figure of 5.1%.

No child was excluded on account of uncleanliness of clothing during the year.

With a view to promoting cleanliness in the schools, "Sacker Hygienic Combs" and bottles of D.D.T. hair emulsion are issued from the Department free of charge to parents.

SPEECH THERAPY.

The Speech Therapist is employed by the Local Education Authority for 8 sessions weekly.

Cases are referred by the doctors from School Medical Inspections, School Clinics and Infant Welfare Centres; by the School Nurses, the Head Teachers, and occasionally by the Hospitals Medical Staff.

During the year, 9 school children suffering from stammer, and 69 school children and 1 child under school age suffering from other forms of speech defect were referred for treatment as new cases.

A total of 89 school children suffering from stammer, and 131 school children and 3 children under school age with other speech defects received treatment, of whom 11 school children suffering from stammer, and 63 school children with other speech defects were discharged as fit.

At the end of the year cases were attending the centres as follows:—

North Earlham Centre (Monday morning)	...	11
Churchman House Centre (Monday afternoon)	...	10
Lakenham Centre (Wednesday morning)	...	10
Stuart Centre (Wednesday morning)	...	6
Churchman House Centre (Wednesday afternoon)		14
Larkman Lane Centre (Thursday morning)	...	9
West Earlham Centre (Thursday morning)	...	10
Norman Centre (Thursday afternoon)	...	15
Colman Road Centre (Friday morning)	...	13
Churchman House Centre (Friday afternoon)	...	14

Occasional visits were also paid to other schools for consultations with Head Teachers.

In addition, 26 cases were under observation only, and 3 cases who had been suggested as suitable for treatment were awaiting an initial interview with the Speech Therapist.

A total of 2614 attendances were made at the Centres during the year by school children, and 70 by children under school age.

The Speech Therapist reports as follows:—

“ 223 speech cases were treated in Norwich during 1955. Of this number, 41.5% were cases of dyslalia, in which one or more defective sounds were treated. Without a speech therapist's special knowledge, many of these children would have gained normal speech by the time of leaving school, but some would have been left with one or two defective sounds to carry over into adult life. Thus the main advantage of the speech therapist's work in these cases is to prepare the way for reading lessons, and indeed the teaching of all English subjects. Of this 41.5%,

approximately 6% are children with below average intelligence, in the 80 I.Q. group, and in normal schools. These, of course, take months and even years to improve one or two sounds. Under the present treatment it is rare to have a case of dyslalia left in a child over Primary School age.

“Of the remainder, 39.9% are stammerers. Again, most children are being helped to overcome this nervous disability before reaching the Secondary School stage.

“The remaining 18.6% of cases treated have been partially deaf, for lip reading, 10.6%; spastics 2.7%; cleft palates 5.3%. These children whose speech defect is linked with a physical handicap need treatment the most, and derive the most lasting benefit. Clear and easy speech helps to free the whole personality, which might otherwise grow warped.”

ARRANGEMENTS FOR THE ASCERTAINMENT AND TREATMENT OF CHILDREN WITH DEFECTIVE HEARING.

Children who are suspected to be suffering from defective hearing are examined by the school medical officers during the course of School Medical Inspection, or at the School Clinic at Churchman House, 68, St. Giles Street, Norwich, on Monday, Wednesday and Saturday mornings. Such cases are referred by parents, teachers, school nurses, or general medical practitioners, and when found to be deaf, the school medical officer (with the consent of the family doctor) refers such cases for specialist advice at the Out-Patients Clinics of the Regional Hospital Board, held at the Jenny Lind Hospital, Unthank Road, or the Norfolk and Norwich Hospital, St. Stephen's Road, Norwich.

The Deafness Clinics at these Hospitals are in the charge of Mr. R. A. Highmoor, M.A., M.B., B.Ch., F.R.C.S. (Edin.), D.L.O., and Mr. I. S. Young, M.B., Ch.B. (Glas.), F.R.C.S. (Edin.), D.L.O. In the event of either of these consultants recommending the use of a hearing aid, the patient is supplied with this, and instructed in its use, at the Hearing Aid Clinic of the Regional Hospital Board, held on alternate Tuesday afternoons at the West Norwich Hospital, Bowthorpe Road. Should the patient encounter difficulties at a later date in the use, or working of the aid, a further appointment may always be made, direct with the Hearing Aid Clinic. Audiometer tests are done at the local hospital and there is also a speech therapist there who gives instruction in lip reading when recommended by the specialist.

Up to the present time the Local Education Authority has employed no deaf-trained teacher for children suffering from partial deafness, but some children considered suitable for lip-reading lessons are referred to the Local Education Authority's speech therapist, Miss D. Barber, L.C.S.T., who is employed on

a part-time basis of eight half-days per week. Miss Barber herself has visited the Hearing Aid Clinic for instruction in the method of working the hearing aids, so that she is in a position to advise the patient or parent concerning it. A link is also maintained with the hospital specialists in that Miss Barber visits the Ear, Nose and Throat Clinics there once a month.

Head Teachers supply on request educational reports on the progress of children, whenever it is considered that these will be of help to the consultants. Similarly, any recommendations made by the consultants of which the teachers should be aware, are passed on to them, via the Director of Education.

Whenever practicable, children suffering from partial deafness continue their education at ordinary school, using their hearing aids, and if necessary, sitting near the front of the class. The School Nurses are informed of such cases, and are always ready to help and advise both parents and children.

When these arrangements have been found to be of no benefit, a recommendation has hitherto been made for the child's admission to the East Anglian Special School for Deaf Children, Church Road, Gorleston. As a result of reorganisation, however, the school in August next will cease to provide residential treatment for partially deaf children, and in view of this decision the Education Committee in October last resolved to appoint a full-time deaf-trained teacher, the post to carry with it a special responsibility allowance.

The post has not yet been filled, but it is anticipated that the duties will include :

- (a) teaching in ordinary school subjects for children whose hearing appears to be retarding their educational progress;
- (b) individual lip-reading tuition for half-an-hour, twice a week, for children for whom that would obviously be helpful.

After the successful establishment of (a) and (b) above, consideration is to be given to the setting up of a Nursery Class for children under school age, detected as severely deaf. Such a class would be assisted by a specially trained health visitor, and on a number of occasions parents would be present for advice on handling deaf children, and it would be run on clinic lines. It is not clear at this stage whether a deaf-trained teacher would be essential for more than occasional attendance.

Audiometric testing of children individually and in groups at school is not undertaken by the School Health Service but individual tests are made by the specialists at the local hospitals.

CHILD GUIDANCE.

The Child Guidance Clinic has been administered since 1942 by the Psychiatric Services of the City of Norwich, in conjunction with the Education and Health Committees.

During the year, 134 Primary, 116 Secondary, and 24 Special School children were treated at the Clinic, which is held in premises at Duke Street.

17 other children (under school age, private schools, etc.) also received treatment.

(5) INFECTIOUS DISEASES.

GENERAL.

There was no case of Diphtheria among school children.

Notifications of Scarlet Fever in schoolchildren decreased from 103 to 46. From investigation of contacts at home and at school 18 nasal carriers of the hæmolytic streptococcus were detected among schoolchildren. These had been cleared by the end of the year.

20 cases of Measles in schoolchildren were notified.

Whooping Cough cases in schoolchildren notified numbered 108, a decrease of 91 on the previous year's figure.

5 new notifications were received during the year of children suffering from Pulmonary Tuberculosis, 1 of the children was aged 6 years, 1 aged 12 years, 1 aged 13 years, and 2 aged 14 years. 4 of the children were admitted to a Sanatorium, the other was a primary infection.

4 children were notified as suffering from Non-pulmonary Tuberculosis (3 Cervical Glands and 1 Meninges). The meningeal case, who was a contact of his mother, subsequently died.

9 cases of Pneumonia in schoolchildren were notified compared with 20 in 1954.

Food poisoning cases in schools increased from 21 to 54. There was no outbreak due to school meals.

There was a rise in the number of cases of Infective Hepatitis from 10 to 11.

Amongst children attending Private Schools, 4 cases of Measles, 2 of Whooping Cough, 8 of Dysentery, 3 of Food Poisoning, 2 of Pulmonary Tuberculosis, and 1 of Non-pulmonary Tuberculosis (Cervical Glands) were notified.

INFECTIOUS DISEASES NOTIFIED, 1955.

SCHOOLS	Number on Roll at end of Year	Diphtheria			Scarlet Fever	Measles	Whoop- ing Cough	Food Poisoning	Pul. T.B.	Non- Pul. T.B.	Dysen- tery	Jaundice	Ac. Polio- myelitis																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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SCARLET FEVER.

Cases of scarlet fever among school children numbered 46 compared with 103 in 1954 and 279 in 1953. There were no admissions to hospital. All home and class contacts had swabs taken from the nose and throat and those found to be carrying the hæmolytic streptococcus were treated, class contacts being dealt with at school. Eighteen carriers were detected and successfully treated.

At the present time scarlet fever is a mild disease in this country, but this has not always been so, for there have been alternating periods of severity and mildness of the disease. There is no means of forecasting when the mild form of the disease may become more severe. The policy in regard to scarlet fever at the present time is dictated by its mildness and the fact that the causative organism is found in the nose and throat of about 4-8% of the population. Hence admission to hospital is not now advocated except in special circumstances, and exclusion of contacts from school is not practised. A return to the severe form of scarlet fever would mean a revision of the present codes of practice to suit the circumstances.

CONTROL OF TUBERCULOSIS.

B.C.G. VACCINATION.

The scheme for the vaccination with B.C.G. of tuberculin negative school children approaching their fourteenth birthday was carried out in the following Secondary Modern Schools in the city.

		Parental consent given.	Parental consent not given.
Lakenham (Boys)	...	49	24
Alderman Jex (Boys)	...	56	34
Henderson (Boys)	...	75	30
Dowson (Girls)	...	26	16
Angel Road (Girls)	...	48	23
Gurney (Girls)	...	76	23
Total	...	330	150

The number tested by the Heaf multiple pressure technique was 320. 257 (80%) were negative reactors and 248 were vaccinated successfully with B.C.G. as shown by a further test eight weeks after vaccination. There were no undue or unexpected reactions to the vaccination. Nine negative reactors who were absent will be vaccinated at a later date.

The positive reactors to the initial test numbered 63 (20%) and follow up of these children by Chest X-ray examination revealed one boy with early Tuberculosis. Thirteen of the positive reactors were already known to the Chest Physician as contacts of cases of Tuberculosis. The families of the 63 positive reactors were offered a Chest X-ray examination and 121 persons availed themselves of the opportunity but 99 did not. No case of Tuberculosis was detected in those who were X-rayed.

The value of this form of prevention in the field of Tuberculosis has received further support by the preliminary findings of the Tuberculosis Vaccines Clinical Trials Committee of the Medical Research Council, in which it is revealed after $2\frac{1}{2}$ years study that the annual incidence of Tuberculosis in the vaccinated group of children aged 14-15 years was 0.37 per 1000 compared with 1.94 per 1000 in a comparable tuberculin negative unvaccinated group.

CASES OF PULMONARY TUBERCULOSIS IN SCHOOLS.

1. A young teacher in an Infant School was notified in February as a case of Pulmonary Tuberculosis and although she was thought to be non-infectious it was nevertheless considered advisable to offer a tuberculin test to all the 270 children in the school. A letter was sent to the parents of each child and 244 consents for the test were received, a very commendable return. Six children showed a positive reaction to the test and all six were known to the Chest Physician as contacts of a case of tuberculosis. This proved beyond reasonable doubt that the teacher did not infect any of the children who were tested. The teacher made excellent progress and should soon be fit to resume her teaching duties again.

2. A thirteen year old girl in a Secondary School was notified in March as a case of Pulmonary Tuberculosis, non-infectious to others. It was decided to offer a tuberculin test to the other girls in her class and 30 of the 34 girls were tested with the consent of their parents. Three of the class contacts (one resident in the County) were positive reactors and their Chest X-ray examinations were satisfactory.

3. At another Secondary School an eleven year old girl, resident in the County, was notified to the County Medical Officer, Norfolk County Council, and on this information a tuberculin test was offered to the girls in her class. Thirty girls were tested and seven were positive reactors. These seven girls, the teaching and domestic staff of the school had a Chest X-ray examination and all were satisfactory.

4. During Heaf testing of 14 year old boys one of the reactors proved to be a case of early Tuberculosis. As he was potentially infectious it was decided to offer a tuberculin test to all the boys in the school who could have been possible contacts, namely 240 boys. Consents were received for 165 boys to be tested and the 31 positive reactors were X-rayed. Three of these required further investigation at the Chest Clinic before they were declared to be free of Tuberculosis.

5. A case of Pleurisy, most probably Tuberculosis, occurred in a County child attending a Private School in the City. As a possible source of infection was found elsewhere and the child was non-infectious it was not considered necessary to take any action in the school.

6. An open case of Pulmonary Tuberculosis was notified in November in a boy attending a Secondary School. He was admitted

to a Chest Hospital and was still an in-patient at the end of the year. Arrangements were made to offer the tuberculin test to his class early in 1956. The reason for the delay between the date of the notification of the case and the test of the class mates is due to the fact that the tuberculin skin test may not show a positive reactor within six weeks of infection by the tubercule bacillus.

The B.C.G. programme and the investigation of cases of tuberculosis occurring in schools would be most difficult without the close co-operation of the Chest Physician at the Chest Clinic, Dr. O'Riordan, the Director of the Mass Miniature Radiography Unit, the Director of Education and the Head Teachers of the schools, and I thank them for their valued help.

ANTERIOR POLIOMYELITIS.

One child aged 6 years was admitted to the Infectious Diseases Hospital in November with the diagnosis of non-paralytic poliomyelitis. However, three days later paralysis appeared in both legs. He is making satisfactory progress, but will be left with some leg paralysis.

(6) PROVISION OF MEALS.

Mid-day meals are provided by the Local Education Authority to all school children whose parents request these. From time to time the School Medical Officers also put forward cases where they think meals would particularly benefit.

During the year 8 Primary and 1 Secondary school children were recommended under these arrangements.

The percentage of children in school having school meals is about 34. and about 83% take milk.

In 1942 the Education Committee inaugurated a scheme whereby children receiving meals could attend at the Dining Rooms during the holidays. The arrangements were continued throughout the year, with results as shown in the following table:—

Easter Vacation.

395 children attended out of 473 (84%) who expressed the wish to attend.

Whitsun Vacation.

394 out of 460 (86%).

Summer Vacation.

305 out of 424 (72%).

Autumn Vacation.

368 out of 474 (78%).

Christmas Vacation.

314 out of 414 (76%).

Since September, 1946, school milk has been provided free of charge in all grant-aided Primary and Secondary Schools, under the terms of Circulars 119 and 278 of the Ministry of Education dated 22nd July, 1946, and 1st July, 1954, respectively. The permitted quantity of milk per pupil is maintained as far as possible at one-third of a pint per day, except in the Colman Road Special School for Physically Handicapped Children, and the Earlham Nursery School, where two-thirds of a pint daily is granted.

From 1st August, 1947, the Welfare Foods Scheme inaugurated by the Ministry of Food has provided that one pint of milk daily at 1½d. per pint should be available from registered suppliers all the year round for children between the ages of 5 and 16 who are unable by reason of disability of mind or body to attend school.

A number of invalid children under the Visiting Teacher have availed themselves of this scheme during the year.

(7) CO-OPERATION OF PARENTS, TEACHERS, WELFARE OFFICERS AND VOLUNTARY BODIES.

MEDICAL AND DENTAL INSPECTION AND TREATMENT.

The co-operation of parents, teachers, etc., has been received as in previous years.

Children who are sent to the School Dental Clinic by the Medical Officers, Head Teachers, School Nurses, etc., have to obtain the sanction, in writing, of their parents before treatment is carried out.

The following table shows the extent to which parents attended the periodic medical inspections at the Primary and Secondary Schools :—

Group.	No. of Pupils. Examined.	Percentage of Parents Present.	
		1955.	1954.
Entrants	1929	1873 (97.1%)	97.0
Second Age Group	1815	1242 (68.4%)	63.4
Third Age Group ...	1138	289 (25.4%)	31.2
Other Periodic Insps.	3227	2557 (79.2%)	86.4

At the Colman Road Special School for Educationally Sub-normal children, of the 134 pupils examined, parents were present with 55 or 41.0%, and at the Nursery School of the 17 pupils examined, parents were present with 15 or 88.2%.

There has been no change in the arrangements for follow-up.

The co-operation of the Head Teachers and the Welfare Officers in sending children to the Clinics, and persuading parents to carry out treatment, etc., still continues.

The Invalid Children's Aid Association and the Inspectors for the Prevention of Cruelty to Children continued to render valuable assistance. Particulars of the cases dealt with by the latter Voluntary Association are given on page 152.

(8) HANDICAPPED PUPILS.

These are referred to the School Medical Officer from various sources—the Teaching Staff, the Welfare Officers and School Nurses; occasionally they are found at the school medical inspections and clinics.

(a) RESIDENTIAL SPECIAL SCHOOLS.

All children who attend Residential Special Schools are examined by the School Medical Officer before they return after holidays.

BLIND PUPILS. Responsibility for 1 blind girl already in attendance at the East Anglian School, Gorleston, was accepted by the Local Education Authority during the year, upon the removal of her parents into the city.

The diagnosis was changed from partially sighted to blind in the case of two boys already in attendance at this school.

One partially sighted boy was admitted during the year.

At the end of the year 3 blind boys, 1 blind girl, and 2 partially sighted boys were on the register.

1 blind boy (under 5 years of age) and 1 partially sighted girl were awaiting admission to residential schools at the end of the year.

DEAF PUPILS. During the year 1 deaf girl left the East Anglian School, and 1 partially deaf boy was discharged as fit for ordinary school.

1 boy and 1 girl (both partially deaf) were admitted.

At the end of the year 10 boys (8 deaf and 2 partially deaf) and 8 girls (5 deaf and 3 partially deaf) were on the register.

1 deaf girl (under 5 years of age) was awaiting admission at the end of the year.

1 girl suffering from multiple defects (deafness, E.S.N., and spastic) was also awaiting admission to a boarding special school at the end of the year.

1 girl left the Mary Hare Grammar School for the deaf during the year.

The following table shows the number of children for the past eight years who were on the registers at the appropriate boarding special schools on 31st December each year:—

Year.	BLIND		PARTIALLY SIGHTED.		DEAF.		PARTIALLY DEAF	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
1948	2	—	—	—	6	3	—	—
1949	2	—	—	—	5	2	—	—
1950	1	—	—	—	5	3	—	—
1951	1	—	—	—	4	3	—	—
1952	—	—	2	—	5	5	—	1
1953	1	—	2	—	7	6	1	1
1954	1	—	3	—	8	7	2	2
1955	3	1	2	—	8	5	2	3

EPILEPTIC PUPILS. 1 girl was admitted to the Chalfont St. Peter Colony School for Epileptics during the year.

EDUCATIONALLY SUB-NORMAL PUPILS. No pupils were in attendance at Boarding Special Schools during the year.

MALADJUSTED PUPILS. 1 boy left Colne Cottage Hostel, Cromer, during the year. One boy, classified as Educationally Sub-normal and Maladjusted, was awaiting admission to a Boarding Special School at the end of the year.

Responsibility for one boy at Morley Hall Hostel was accepted by the Local Education Authority during the year, upon the removal of the parents into the city. This boy left the Hostel later in the year.

PHYSICALLY HANDICAPPED AND DELICATE PUPILS. 1 girl suffering from Asthma was discharged during the year from a Boarding Special School.

No children were in attendance at the end of the year.

1 girl suffering from Spina Bifida and Congenital Dislocation of both Hip-joints was awaiting admission to a Boarding Special School at the end of the year.

DIABETES. There were no children suffering from severe Diabetes attending school during 1955.

(b) DAY SPECIAL SCHOOLS.

EDUCATIONALLY SUB-NORMAL PUPILS.

These are accommodated at the Colman Road Special School for Educationally Sub-normal Pupils.

Educationally Sub-normal Pupils are referred to the School Medical Officer by the Education Department and by parents. Others are found at school medical inspection. They are admitted to the Special Day School, or in exceptional circumstances, may remain at ordinary schools, or where the home circumstances are unsatisfactory are recommended for Boarding Special School, but it is difficult to obtain a vacancy. Children who are ineducable are referred to the Local Health Authority.

Of the 21 new cases examined mentally during the year, 16 were referred by the Education Staff, 1 by the School Health Service, 2 by a Consultant at the Jenny Lind Hospital, 1 by the Children's Officer, and 1 by a Consultant at the Hospital for Sick Children, Great Ormond Street, London. 6 children examined in previous years were re-examined during the year. 6 boys and 13 girls were recommended for admission to the Special Day School; 2 boys and 3 girls were recommended to be referred to the Local Health Authority as ineducable; 1 boy was certified unfit for school

and was recommended for re-examination later; 1 boy was recommended for admission to the Colman Road Special School (Section for Delicate and Physically Handicapped Pupils) and for review in one year; and 1 girl suffering from multiple defects (Deafness, Educationally Sub-normal and Spastic) was recommended for admission to a Boarding Special School suitable to her disabilities.

In addition, 4 boys and 4 girls already attending the Special Day School were brought forward for special examination.

2 boys and 1 girl were recommended to be referred to the Local Health Authority for supervision on leaving the Special School; 1 boy and 1 girl were recommended to continue in attendance at the Special Day School (E.S.N. Section); 2 girls were recommended to be referred to the Local Health Authority as ineducable, and 1 boy was recommended to be referred to the Local Health Authority with a view to receiving institutional treatment, being incapable of receiving education on the grounds that it was inexpedient that he should be educated in association with other children.

71 boys and 66 girls (including 7 boys and 7 girls recorded under the heading of "Children Suffering from Multiple Defects" on page 169), were on the register at Colman Road Special School (Section for Educationally Sub-normal Pupils) at the end of the year, and 3 children were awaiting admission.

PHYSICALLY HANDICAPPED AND DELICATE PUPILS.

The arrangements for the admission of children to the Special Day School at Colman Road remain the same.

Fruit juices are given daily with school dinners, and fresh fruit is issued twice weekly to each child. Cod Liver Oil is also supplied daily to each child and Parrish's Food and Virol when deemed necessary.

Remedial and breathing exercises were continued for cases of asthma, bronchiectasis and collapse of lung, and for kyphosis and other deformities, the school nurse attending for three sessions weekly for this purpose. 38 children were on the list for regular exercises.

The Consultant Chest Physician has been favourably impressed by the satisfactory progress being made by most of the children suffering from bronchiectasis and asthma who attend these classes.

During the year 60 boys and 54 girls came under the supervision of Dr. Riddel at this school. 16 boys and 11 girls were admitted, and 2 boys re-admitted. 9 boys and 14 girls were certified fit to attend ordinary schools, and in addition 1 boy and

2 girls left the city, 2 girls became unfit to attend school and were placed on the list of the Visiting Teacher, and 3 boys were admitted to Hospital Special Schools.

At the end of the year 4 boys and 4 girls were awaiting admission.

49 boys and 36 girls remained at the end of the year, who, on admission, had been found to be suffering from the following disabilities:—

Disease or Disability.				Boys.	Girls.
<i>Category J (Delicate)</i> —					
Malnutrition	...	...	...	—	1
Malnutrition and other conditions			...	1	1
Delicate	...	...	...	3	2
Delicate and other conditions—					
Bronchitis	...	...	...	4	3
Enuresis	...	...	...	5	3
Night Terrors	...	...	...	—	3
Petit Mal	...	...	...	1	—
Nervousness	...	...	...	—	1
Congenital Stricture of Oesophagus			...	1	—
Mesenteric Adenitis	...	...	...	1	—
Paralysis and Shortening of Leg			...	1	1
Rickets	...	...	...	1	—
Hare Lip	...	...	...	—	1
Delicate with History of Tuberculosis			...	2	2
Also Erythema Nodosum	...	...	...	1	—
Pulmonary Tuberculosis		...	...	8	3
Asthma	...	...	...	6	6
Bronchiectasis	...	...	...	4	6
<i>Category H. (Physically Handicapped)</i> —					
Paralysis, Deformities, etc.	...	...	...	10	3
TOTALS				49	36

(c) HOME TUITION.

Handicapped pupils who, in consequence of their disability, have to be taught in their own homes by the Visiting Teacher, are examined periodically during the year by a Medical Officer.

In November, 1955, the Education Committee agreed to develop this work in various ways, including the payment of regular visits to the Jenny Lind Hospital for Children, and the Burns Ward of the West Norwich Hospital, by the Teacher.

Children absent, or likely to be absent, from ordinary school, and at home for a month or more with injuries or non-infectious illness are also now considered with a view to home tuition.

At the end of the year 8 boys and 7 girls were being taught in their homes by this Teacher. They were suffering from the following defects:—

BOYS: Hæmophilia (3 children); Amyotonia Congenita; Bilateral Congenital Dislocation of Hip-joints; Mesenteric Adenitis; Tuberculosis of Renal Tract; Asthma.

GIRLS: Congenital Heart Disease (2 children); Scoliosis; Perthe's Disease Right Hip-joint; Spastic Diplegia; Amputated Right Leg following Thrombosis; Spina Bifida and Bilateral Congenital Dislocation of Hip-joints.

In addition, 2 boys and 4 girls were taught in their homes for short periods during the year. They suffered from the following defects:—

BOYS: Sinusitis; Broken Leg.

GIRLS: Congenital Heart Disease; Primary Pulmonary Tuberculosis; Epilepsy; Deformity Left Foot following Anterior Poliomyelitis.

(9) FULL-TIME COURSES OF FURTHER EDUCATION FOR DISABLED STUDENTS.

No students received training at the Norwich Institution for the Blind or elsewhere during the year.

(10) NURSERY SCHOOL AND CLASSES.

The numbers of nursery pupils on the registers on 31st December were as under:—

Earlham Nursery School ...	...	...	89 children
Nursery Class, Catton Grove School	...	...	59 ..

A number of children under 5 years of age were also attending other infant schools.

The facts disclosed by medical inspection at the Earlham Nursery School during the year, and the total results attained were as follows :—

Defect or Disease.	"Specials"		Total Defects.	Referred for Treatment.	Total Defects Treated†.	Total Defects Cured†.
	Periodic Inspections.	at School or Clinic.				
Skin	—	—	—	—	20	20
Eye :						
Vision and Squint	1	3	4	4	3	2
Other	—	—	—	—	1	1
(Glasses prescribed)						
Ear :						
Hearing	—	—	—	—	—	—
Otitis Media ...	—	—	—	—	—	—
Other	—	—	—	—	—	—
Nose or Throat ...	1	—	1	1	2	2
Speech	1	—	1	—	—	—
Cervical Glands ...	—	—	—	—	—	—
Heart and Circulation	—	—	—	—	—	—
Lungs	—	—	—	—	—	—
Developmental :						
Hernia	—	—	—	—	—	—
Other	—	—	—	—	—	—
Orthopædic :						
Posture	—	—	—	—	—	—
Flat Foot	—	—	—	—	1	1
Other	—	—	—	—	—	—
Nervous System :						
Epilepsy	1	—	1	—	—	—
Other	1	—	1	1	—	—
Psychological :						
Developmental ...	2	—	2	—	—	—
Stability	—	—	—	—	—	—
Malnutrition	—	—	—	—	—	—
Other	—	—	—	—	—	—

†These columns include cases referred from previous years, cases treated by the School Nurses at District Minor Ailments Clinics, etc.

(11) MISCELLANEOUS.

GENERAL CONDITION OF PUPILS. The following table shows the classification of the general condition of pupils inspected during the years 1948-1955:—

Year.	A (Good).		B (Fair).		C (Poor).	
	No.	%	No.	%	No.	%
1948 ...	3366	34.2	5179	52.6	1299	13.2
1949 ...	3015	33.0	4776	52.3	1345	14.7
1950 ...	3415	35.1	4953	50.9	1355	14.0
1951 ...	3773	36.9	5204	50.9	1244	12.2
1952 ...	3738	39.0	4722	49.3	1122	11.7
1953 ...	4663	42.2	5195	47.1	1181	10.7
1954 ..	3732	44.5	3955	47.2	701	8.3
1955 ...	4058	49.1	3635	44.0	567	6.9

HOME VISITING. The following-up arrangements by the School Nurses, etc., have not been altered during the year. 961 home visits were recorded by the School Nurses in respect of children who had been advised to have medical treatment.

24 children were involved in families referred during the year by the Welfare Officers or by the School Medical Officers to the National Society for the Prevention of Cruelty to Children.

DEATHS. There were 10 recorded deaths of school children, compared with 6 in the previous year. The causes of death were:—Convulsions and Congenital Hydrocephalus, 1; Asphyxia due to Inhaled Vomit after Convulsion, 1; Uræmia and Sub-acute Nephritis, 1; Uræmia and Malignant Hypertension, 1; Acute Lymphatic Leukæmia, 1; Tuberculous Meningitis, 1; Virus Infection of Lungs, Congenital Scoliosis and Chest Deformities, 1; Acute Asthma, 1; Multiple Head Injuries accidentally received (from falling under moving circus trailer), 1; Cerebral Damage due to fractured base of Skull, 1.

JUVENILE DELINQUENCY. I am informed that there were 219 cases of juvenile delinquency during the year, 194 boys and 25 girls—a decrease of 25 cases.

REMAND HOMES. 15 boys and 2 girls were admitted during the year, compared with 11 boys and 8 girls in 1954.

DISTRIBUTION OF MEDICAL FOODS THROUGH THE INFANT WELFARE CENTRES. During the year, 936 individual school children were supplied through the Infant Welfare Centres with a

total of 1152 lbs. of Oil and Malt, 918 lbs. of Virol, 954 eight-ounce bottles of Parrish's Food, 20 lbs. of Virolax, 63 lbs. of Maltoline with Iron, and 343 lbs. of Glucose, having been recommended for this either during the course of School Medical Inspection, or at one of the School Clinics. The cost is borne by the Education Committee.

EXAMINATION OF TEACHERS, ETC. Examinations have been made as follows:—140 newly appointed teachers, 48 students prior to commencing at college.

EXAMINATION OF CHILDREN TEMPORARILY RESIDENT IN THE CITY. 7 children, members of a travelling entertainment troupe visiting Norwich, were medically examined upon arrival, and all were found to be fit. 7 re-examinations were made (all fit).

FOOD HYGIENE. Every care is taken by the School Meals Staff of the Education Department to bring to the notice of their Kitchen Staff the importance of maintaining a very high standard of hygiene.

Medical examination of all Canteen Staff is undertaken before employment and this includes a full history and bacteriological examination. Staff are encouraged to report any significant illness.

As a precautionary measure, food samples are kept for 48 hours after each meal.

PRIMARY SCHOOLS.
(Including Nursery and Special Schools.)

TABLE I.
MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED
PRIMARY SCHOOLS.

A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed groups—

Entrants	...	...	...	...	1929
Number of other Periodic Inspections	...	...	...	...	2602
Nursery School	...	...	...	...	17

Colman Road Special School (E.S.N. Section):—

Age	6	7	8	9	10	11	12	13	14	15	16	
	8	8	14	14	12	13	21	19	12	18	—	134

Grand Total ... 4682

B.—OTHER INSPECTIONS.

Number of Special Inspections—

Primary Schools	...	...	...	1121
Nursery School	...	...	...	8
Colman Road Special School	...	...	...	32

Number of Re-inspections—

Primary Schools	...	...	...	6598
Nursery School	...	...	...	15
Colman Road Special School	...	...	...	1032

Grand Total ... 8806

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of INDIVIDUAL PUPILS found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and infestation with Vermin).

(NOTE—No individual pupil recorded more than once in any column of this table.)

Age-groups. (1)	For Defective Vision (excluding Squint). (2)	For all other conditions recorded in Table 11A. (3)	Total Individual Pupils (4)
Nursery School ...	—	3	3
Entrants ...	22	355	366
Other Periodic Insps.	83	411	475
Colman Road Special School (E.S.N. Sec.)	12	134	134
Grand Total ...	117	903	978

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31ST DECEMBER, 1955.

Defect or Disease. (1)	Periodic Inspections. Number of Defects.		Special Inspections. Number of Defects.	
	Requiring Treatment.	Requiring Observation but not Treatment.	Requiring Treatment.	Requiring Observation but not Treatment.
	(2)	(3)	(4)	(5)
Skin	95	57	258	5
Eye—				
Vision	117	111	298	22
Squint	61	48	22	3
Other	23	12	38	6
Ear—				
Hearing	16	22	26	5
Otitis Media	14	9	12	1
Other	8	7	17	3
Nose or Throat	132	251	68	17
Speech	24	51	33	8
Cervical Glands	7	50	6	2
Heart and Circulation	47	42	8	1
Lungs	41	93	19	3
Developmental—				
Hernia	16	46	4	—
Other	7	78	5	1
Orthopædic—				
Posture	7	22	—	1
Flat Foot	36	23	1	2
Other	91	187	26	8
Nervous System—				
Epilepsy	11	11	7	1
Other	43	60	40	9
Psychological—				
Developmental	140	21	18	5
Stability	6	9	10	1
Other	225	69	170	14

**B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS
INSPECTED DURING THE YEAR IN AGE GROUPS UP TO
31ST DECEMBER, 1955.**

Age-Groups.	No. of Pupils Inspected.	A. (Good).		B. (Fair).		C. (Poor).	
		No.	%	No.	%	No.	%
Nursery School ...	17	6	35.3	9	52.9	2	11.8
Entrants ...	1929	932	48.3	903	46.8	94	4.9
Other Periodic Insps.	2602	1214	46.7	1188	45.6	200	7.7
Colman Rd. Spec. School (E.S.N. Sec.)	134	34	25.4	62	46.3	38	28.3
TOTAL ...	4682	2186	46.7	2162	46.2	334	7.1

TABLE III.
INFESTATION WITH VERMIN.

- (i) Total number of examinations in the Schools by School Nurses and other authorised persons ... 33023
- (ii) Total number of individual pupils found to be infested:—
- (a) by School Nurses, etc. ... 71
- (b) by Medical Officers ... 3
- (iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ... Nil
- (iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ... Nil
- (v) Number of pupils cleansed at parents' request under arrangements made by the Local Education Authority ... 11
- (vi) Number of pupils cleansed by parents ... 63
- (vii) Average number of visits per school (department) made during the year by the School Nurses and other authorised persons ... 3.0

TABLE IV.
 RETURN OF DEFECTS TREATED DURING THE YEAR ENDED
 31ST DECEMBER, 1955.
 GROUP I.—DISEASES OF THE SKIN (excluding Uncleanliness, for
 which see Table III).

Defect or Disease				Number of Defects treated or under treatment during the year.	
				By the Authority.	Otherwise.
Ringworm—Scalp					
X-Ray Treatment	...	...		—	—
Other Treatment	...	...		—	1*
Ringworm—Body	...	...		—	1
Scabies	...	...	...	2	1
Impetigo	...	...	...	52	2
Other Skin Diseases	...	...	...	2531	44
TOTAL				2585	49

*Found in 1954 but not certified fit until 1955.

GROUP II.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

Defect or Disease				Number of Defects dealt with.	
				By the Authority.	Otherwise.
External and other, excluding errors of Refraction and Squint	...	...		312	12
Errors of Refraction (including Squint).					
(Operations for Squint are recorded separately in the body of the Report)	...	...	...	449*	7
TOTAL				761	19
Total number of pupils for whom spectacles were:					
(a) Prescribed	...	...		232*	5
(b) Obtained	...	...		222*	5

*Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

GROUP III.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Total number treated.	
	By the Authority.	Otherwise.
Received Operative Treatment—		
(a) for diseases of the ear ...	—	1
(b) for adenoids and chronic tonsillitis ...	—	284
(c) for other nose and throat conditions ...	—	7
Received other forms of treatment ...	181	118
TOTAL ...	181	410

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals or hospital schools	17	
(b) Number treated otherwise, e.g., in clinics or out-patient departments ...	By the Authority. —*	Otherwise. 224†

*There were 5 cases having other forms of treatment provided by the Authority, other than through a clinic or out-patient department.
†Includes 42 cases under observation at the clinic.

GROUP V.—CHILD GUIDANCE TREATMENT.

	Number of Cases Treated.	
	In the Authority's Child Guidance Clinics.	Elsewhere.
Number of Pupils treated at the Child Guidance Clinics ...	158	—

GROUP VI.—SPEECH THERAPY.

	Number of Cases Treated.	
	By the Authority.	Otherwise.
Number of Pupils treated by Speech Therapist ...	178	1

GROUP VII.—OTHER TREATMENT GIVEN.

Defect or Disease				Number of Cases Treated.	
				By the Authority.	Otherwise.
(a)	Miscellaneous	Minor	Ailments	4702	9
(b)	Other:—				
	(1)	Cervical	Glands ...	8	10
	(2)	Heart and	Circulation ...	57	18
	(3)	Lungs	... ..	93	86
	(4)	Developmental—			
		Hernia	... ..	—	14
		Other	... ..	1	10
	(5)	Nervous System—			
		Epilepsy	... ..	—	36
		Other	... ..	72	54
	(6)	Psychological—			
		Developmental	... ..	133	—
	(7)	Other	... ..	552	140
	TOTAL ...			5618	377

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1)	Number of pupils inspected by the Dental Officers:—				
	(a)	Periodic age groups	...	...	2622
	(b)	Specials	...	...	3866
	(c)	TOTAL (Periodic and Specials)		...	6488
(2)	Number found to require treatment			...	6006
(3)	Number referred for treatment			...	6006
(4)	Number actually treated			...	3868
(5)	Attendances made by pupils for treatment			...	7837
(6)	Half-days devoted to			{ Inspection 26 } { Treatment 2485* }	Total 2511
(7)	Fillings	...	{ Permanent Teeth 2564 } { Temporary Teeth 278 }	Total	2842
(8)	Number of Teeth Filled	...	{ Permanent Teeth 1855 } { Temporary Teeth 231 }	Total	2086
(9)	Extractions	...	{ Permanent Teeth 971 } { Temporary Teeth 4890 }	Total	5861
(10)	Administration of general anæsthetics for extractions				2886
(11)	Other Operations		{ Permanent Teeth 1082 } { Temporary Teeth 492 }	Total	1574

*This figure represents the number of half-days devoted to the treatment of both Primary and Secondary Scholars, as no half-days are devoted to the treatment of Primary Scholars especially.

SECONDARY SCHOOLS

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING SECONDARY SCHOOLS.

A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed groups:—

Second Age Group	Boys	892	1815
	Girls	923	
Third Age Group	Boys	557	1138
	Girls	581	
Number of other Periodic Inspections ...	Boys	226	625
	Girls	399	
Grand Total ...			3578

B.—OTHER INSPECTIONS.

Number of Special Inspections	Boys	291	731
	Girls	440	
Number of Re-inspections	Boys	1591	3691
	Girls	2100	
Grand Total ...			4422

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of INDIVIDUAL PUPILS found at Periodic Medical Inspection to require Treatment (excluding Dental Diseases and Infestation with Vermin).

Age-groups.	For Defective Vision (excluding Squint)	For all other conditions recorded in Table IIA.	Total Individual Pupils
(1)	(2)	(3)	(4)
Second Age Group—			
Boys	41	115	149
Girls	86	148	221
Third Age Group—			
Boys	28	33	60
Girls	59	75	126
Other Periodic Insps.—			
Boys	13	26	37
Girls	58	59	103
GRAND TOTAL ...	285	456	696

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN
THE YEAR ENDED 31ST DECEMBER, 1955.

Defect or Disease. (1)	Periodic Inspections. Number of Defects.		Special Inspections. Number of Defects.	
	Requiring Treatment.	Requiring Observation but not Treatment.	Requiring Treatment.	Requiring Observation but not Treatment.
	(2)	(3)	(4)	(5)
Skin	80	86	217	5
Eye—				
Vision	285	211	254	6
Squint	4	10	2	—
Other	25	14	14	2
Ear—				
Hearing	8	9	6	1
Otitis Media	10	4	5	1
Other	2	3	11	1
Nose or Throat	21	39	18	4
Speech	10	4	9	—
Cervical Glands	1	9	—	—
Heart and Circulation	34	17	2	2
Lungs	7	61	6	—
Developmental—				
Hernia	—	4	1	—
Other	24	24	4	—
Orthopædic—				
Posture	42	46	9	3
Flat Foot	28	24	7	—
Other	32	70	18	4
Nervous System—				
Epilepsy	4	10	1	—
Other	24	23	7	—
Psychological—				
Developmental	2	3	2	—
Stability	2	2	2	—
Other	130	76	71	9

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS
INSPECTED DURING THE YEAR IN AGE GROUPS UP TO
31ST DECEMBER, 1955.

Age-groups.	No. of Pupils Inspected.	A. (Good).		B. (Fair).		C. (Poor).	
		No.	%	No.	%	No.	%
Second Age Group—							
Boys	892	347	38.9	448	50.2	97	10.9
Girls	923	542	58.7	338	36.6	43	4.7
Third Age Group—							
Boys	557	246	44.2	266	47.7	45	8.1
Girls	581	370	63.7	186	32.0	25	4.3
Other Periodic Insps.							
Boys	226	110	48.7	100	44.2	16	7.1
Girls	399	257	64.4	135	33.8	7	1.8
TOTAL	3578	1872	52.3	1473	41.2	233	6.5

TABLE III.
INFESTATION WITH VERMIN.

- (i) Total number of examinations in the Schools by
School Nurses and other authorised persons ... 12766
- (ii) Total number of individual pupils found to be
infested:—
- (a) by School Nurses, etc. 15
- (b) by Medical Officers 2
- (iii) Number of individual pupils in respect of whom
cleansing notices were issued (Section 54 (2),
Education Act, 1944) Nil.
- (iv) Number of individual pupils in respect of whom
cleansing orders were issued (Section 54(3),
Education Act, 1944) Nil.
- (v) Number of pupils cleansed at parents' request under
arrangements made by the Local Education
Authority 5

(vi)	Number of pupils cleansed by parents	...	...	12
(vii)	(a)	Total number of visits to Secondary Grammar School (girls) made during the year by the School Nurses and other authorised persons	...	3
	(b)	Average number of visits per school (department) made during the year by the School Nurses and other authorised persons in the Secondary Modern Schools	...	2.5

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED
31ST DECEMBER, 1955.

GROUP I.—DISEASES OF THE SKIN (excluding Uncleanliness, for which see Table III).

Defect or Disease				Number of Defects treated or under treatment during the year.	
				By the Authority.	Otherwise.
Ringworm—Scalp					
X-Ray Treatment	...	...		—	—
Other Treatment	...	...		—	—
Ringworm—Body	...	...		1	—
Scabies	...	...	...	—	—
Impetigo	...	...	...	15	2
Other Skin Diseases	...	...		1059	46
TOTAL				1075	48

GROUP II.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

Defect or Disease	Number of Defects dealt with.	
	By the Authority.	Otherwise.
External and other, excluding errors of Refraction and Squint ...	97	22
Errors of Refraction (including Squint). (Operations for Squint are recorded separately in the body of the Report)	486*	18
TOTAL ...	583	40
Total number of pupils for whom spectacles were:		
(a) Prescribed	281*	14
(b) Obtained	257*	11

*Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

GROUP III.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Total number treated.	
	By the Authority.	Otherwise.
Received Operative Treatment—		
(a) for diseases of the ear ...	—	—
(b) for adenoids and chronic tonsillitis	—	5
(c) for other nose and throat conditions	—	—
Received other forms of treatment ...	94	40
TOTAL ...	94	45

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals or hospital schools	1	
(b) Number treated otherwise, e.g., in clinics or out-patient de- partments	By the Authority. —*	Otherwise. 88†

*There were 123 cases having exercises in school, and 2 cases having other forms of treatment provided by the Authority other than through a clinic or out-patient department.
†Includes 15 cases under observation at the clinic.

GROUP V.—CHILD GUIDANCE TREATMENT.

	Number of Cases Treated.	
	In the Authority's Child Guidance Clinics.	Elsewhere.
Number of Pupils treated at the Child Guidance Clinics	116	—

GROUP VI.—SPEECH THERAPY.

	Number of Cases Treated.	
	By the Authority.	Otherwise.
Number of Pupils treated by Speech Therapist	42	—

GROUP VII.—OTHER TREATMENT GIVEN.

Defect or Disease				Number of Cases Treated.	
				By the Authority.	Otherwise.
(a)	Miscellaneous	Minor	Ailments	1489	8
(b)	Other:—				
(1)	Cervical	Glands	...	2	1
(2)	Heart and	Circulation	...	35	5
(3)	Lungs	...	...	6	38
(4)	Developmental—				
	Hernia	...	...	—	—
	Other	...	...	5	4
(5)	Nervous System—				
	Epilepsy	...	...	—	23
	Other	...	...	28	16
(6)	Psychological—				
	Developmental	...	...	6	—
(7)	Other	...	...	229	41
TOTAL				1800	136

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1)	Number of pupils inspected by the Dental Officers:—				
	(a)	Periodic age groups	...	...	2937
	(b)	Specials	...	...	1666
	(c)	TOTAL (Periodic and Specials)	...	...	4603
(2)	Number found to require treatment			...	4095
(3)	Number referred for treatment			...	4095
(4)	Number actually treated			...	2258
(5)	Attendances made by pupils for treatment...			...	8811
(6)	Halfdays devoted to			{Inspection 22. Treatment. None especially.	
				Secondary Scholars are treated with Primary Scholars.	
(7)	Fillings	...	{Permanent Teeth Temporary Teeth	6720 38}	Total 6758
(8)	Number of Teeth Filled	...	{Permanent Teeth Temporary Teeth	4795 30}	Total 4825
(9)	Extractions	...	{Permanent Teeth Temporary Teeth	1339 615}	Total 1954
(10)	Administration of general anæsthetics for extractions				747
(11)	Other Operations		{Permanent Teeth Temporary Teeth	2194 53}	Total 2247

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA

			At the Special Day School for Educationally Subnormal Pupils			Boys	Girls	Total
			At other Institutions	At maintained Primary and Secondary Schools	At no School or Institution			
Category A	Blind Pupils.	Children with multiple defects.	...	...	...	7	7	14
			...	...	...	1	2	3*
			...	...	...	1	2	3†
			...	...	...	1	3	4†
Category B	Partially Sighted Pupils.		At Special Schools for the Blind	At maintained Primary and Secondary Schools	At no School or Institution	3	1	4
			—	—	—
			—	—	—
			...	...	...	1	—	1†
Category C	Deaf Pupils.		At Special Schools for the Blind or partially Blind	At maintained Primary and Secondary Schools	At no School or Institution	2	—	2
			...	...	...	—	1	1†
			—	—	—
			—	—	—
Category D	Partially Deaf Pupils.		At Special Schools for the Deaf	At maintained Primary and Secondary Schools	At no School or Institution	8	5	13
			—	—	—
			—	—	—
			...	...	...	—	1	1†
			At Special Schools for the Deaf or partially Deaf	At maintained Primary and Secondary Schools	At no School or Institution	2	8	5
			...	...	...	10	10	20§
			—	—	—
			—	—	—

*Includes 1 boy and 1 girl at Day Special School (Colman Road Open Air School) and 1 girl attending Occupation Centre pending admission to Residential School.
†Includes 2 girls being taught by the Visiting Teacher.
‡On Waiting List for admission to Special Schools of appropriate type; those at present attending no School or Institution being under the age of 5 years.
§Insufficiently deaf to require education at a Special School.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA—Continued.

Category E	Educationally Subnormal Pupils.	At Special Schools for Education-ally Subnormal Children ... At maintained Primary and Secondary Schools ... At other Institutions ... At no School or Institution ...	Boys	Girls	Total
			64	59	123
			1	1	2†
			—	—	—
			—	—	—
Children with Disability of mind.	Notified during the year to the Local Health Authority for the purposes of the Mental Deficiency Acts.	(i.) Children incapable of receiving benefit or further benefit from instruction in a Special School ...	—	4	4
		(ii.) Children unable to be instructed in a Special School without detriment to the interests of other children ...	1	—	1
		Educationally Subnormal Children notified on leaving School on or before attaining the age of 16	2	1	3

†On Waiting List for admission to Special School for E.S.N. Children.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA—Continued.

Category	F	Epileptic Pupils (children suffering from severe Epilepsy).		Category G			Total
				Boys	Girls		
Category F			At Special Schools ...	—	1		1
			At maintained Primary and Secondary Schools ...	6	4		10
			At other Institutions ...	—	—		—
			At no School or Institution ..	—	—		—
Category G		Maladjusted Pupils.	At Special Schools ...	—	—		—
			At maintained Primary and Secondary Schools ...	—	—		—
			At other Institutions ...	—	—		—
			At no School or Institution ...	—	—		—
Category H		Physically Handicapped Pupils.	At Special Schools ...	10	2		12*
			At maintained Primary and Secondary Schools ...	6	2		8
			At other Institutions ...	9	2		5
			At no School or Institution ...	8	5		8||

*At Day Special School (Colman Road Open Air School).
 ||Includes 2 boys and 5 girls being taught by the Visiting Teacher.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA—Continued.

Category I	Pupils suffering from Defective Speech (requiring special educational treatment).		Category J		
			Delicate Pupils.		
	At Special Schools At maintained Primary and Secondary Schools ... At other Institutions ... At no School or Institution	...	Boys	Girls	Total
			—	—	—
			72	23	95
			—	—	—
			—	—	—
	At Special Schools At maintained Primary and Secondary Schools ... At other Institutions ... At no School or Institution	...	Boys	Girls	Total
			38	33	71*
			3	2	5§
			3	—	3
			7	—	7††

*At Day Special School (Colman Road Open Air School).
 §Includes 2 boys and 2 girls on Waiting List for Day Special School.
 †Includes 6 boys being taught by the Visiting Teacher.



